अनुसूची −१

Grants for infrastructure development and purchasing books, furniture, and equipment

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal

Grants for infrastructure development and purchasing books, furniture, and equipment

Campus Information					
Name		Address			
Academic programs		Total No. of Students		Male	Female

Tick for the right box				
Grants for	Tick/ write	Remarks		Yes or No
Physical Facility Development		Proposal		
Purchasing Books		Cost estimation		
Purchasing Furniture		Structural design		
Purchasing Equipment		Sustainability Plan		
Requested Amount		Campus Contribution		

Proposal includes	
1	Brief Introduction of the campus - (history)
2	Background of the program
3	Justification of the program
4	Expected outcomes of the program
5	Program Budgeting (Breakdown of activities, rate and quantity etc.)
6	Action plan for the completion of work
7	Monitoring and evaluation mechanism
8	Sustainability Plan

Documents need to submit	
1	**Proposal** in format
2	**Annual Progress Report: -** that needs to articulate physical, economical, education and social progress and to share major challenges encounter and taken initiatives for achieving good quality of education.
3	**Cost Estimation-** based on government policy
4	**Structure design/drawing**: - Campuses built-up in the area of municipality needs to get structural design approval from local authority.
5	**Need Justification Letter** stating present numbers of buildings/ infrastructures/ furniture /books/ equipment that supports the number of students and academic programs.
	Land Certificate for infrastructures support only
	Other supportive documents

Undertaking by the Institution Head

I hereby undertake and affirm that:

- All the information provided above is true to the best of my knowledge.
- If the grant is provided, I shall solely be responsible for its proper utilization and provide the receipts of expenditure to UGC.
- All the supporting should be verified and attested at the Institute.

Date:
Institution head's Signature: _____
Official Seal

अनुसूची – १.१

Grants for Building Construction

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal

Grants for Building Construction

१. क्याम्पसको नाम :	३. स्थापना मिति :
२. ठेगाना :	४. सम्बन्धन दिने विश्वविद्यालय र मिति :

१. शैक्षिक गतिविधि

क्र.स.	कार्यक्रम	मुख्य विषयहरू	छात्र	छात्रा	जम्मा
१	वि.एड.	जस्तै: अंग्रेजी, गणित			
२	वि.ए.				
३	वि.वि.एस.				
४	वि.एस्सी.				
५	एम.एड				
६	....				
७	....				

भावि थप कार्यक्रमको भएमा

१.

२.

२. भवनको प्रयोग

क्र.स.	प्रयोगमा रहेका कोठाहरू	संख्या	न्यूनतम आवश्यक कोठाहरू (कमि भएमा)
१	कक्षा कोठाहरू		
२	क्याम्पस प्रमुखको कोठा		
३	विभागिय प्रमुखहरूको कोठा		
४	शिक्षक कर्मचारीहरूको कोठा		
५	लेखा सम्बन्धि कार्यका लागि कोठा		
६	प्रशासनिक कार्यका लागि कोठाहरू		
७	पुस्तकालयका लागि कोठा		
८	चमेना गृह		
९	कार्यक्रम सभा हल		
१०	भण्डार कोठा		
११	क्याम्पस अध्ययक्षका लागि छुट्टै कोठा (यदि भए)		

३.**जग्गा सम्बन्धि व्यवस्था**

१. क्याम्पसको आफ्नो स्वामित्वमा रहेको जग्गा ....(लालपुर्जा भएको)

२. क्याम्पसले हाल प्रयोगमा ल्याएको जग्गा ....(भोकाधिकार वा सार्वजनिक)

नोट : क्याम्पसले बुझाएको तथ्याङ्क गलत भएमा विश्वविद्यालय अनुदान आयोगले क्याम्पसलाई सुविधा वञ्चित सुचिमा राखि आगामी वर्षहरूमा आयोगको कुनैपनि सुविधा उपलब्ध गराइने छैन र आवश्यक कारवाहीका लागि सम्बन्धन दिने विश्वविद्यालयमा लेखि पठाईनेछ ।

क्याम्पस प्रमुखको सही   क्याम्पसको छाप

मितिः   मितिः

अनुसूची − २

Application Form for the PhD Fellowship and Research Support

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal
RESEARCH DIVISION

Affix a passport size color photo

PF/RS-1
The UGC Ph.D. Fellowship / PhD Research Support Application
__Incomplete application will not proceed for evaluation__

Faculty		Young		Public Service	

To be filled by the UGC
Draft No./Bill No. of Rs. 300/- Deposit:
Date:
Verified by:

1. Personal Information

A1. Applicant's Full Name (capital letter):		A2. Gender:	A3. Age:	A4. Date of Birth:
A5. Last Degree Obtained:	A6. Citizenship No., Issuing District: A6.1: NID No:			A7. Underprivileged Group:
A8. Permanent Address		A9. Mailing Address:		
A10. Telephone: • Residence: • Office: • Mobile:	A11. Email(s):		A 12. Current Employment: • Designation: • Institution: • Address:	

2. Information About PhD Program Registered

B1. University:	B2. Department:	B3. Campus/School:	
B4. Cluster (Indicate by √)	a. Agriculture/Forestry		e. Education	
	b. Science & Technology		f. Humanities & Social	

				Sciences	
	c. Health Sciences		g. Management		
	d. Engineering				

B5. Registered for the Degree:	B6. Subject:	B7: Specialization :
B8. Registration Number:	B9. Date of Registration:	B10. Date of the Proposal Approval:
B11. Proposed Title of the Research:		

3. Information About the Principal Supervisor (please submit a CV separately)

B12. Name:	B13. Highest Degree Obtained:
B14. Current Position:	B15. Service Period at the Current Position:
B16. Contact Details of the Supervisor • Phone No(s).: • Email(s):	
B17. Total No. of Publications in Ranked journals (with SCImago Journal Rank or JCR Impact Factor)	B18. Total No. of Publications in non-Ranked journals (Non-ranked peer-reviewed journals)
Name of Co-supervisor (if any)	

4. Research Infrastructure in Your Institution

List the relevant research infrastructure in your institution to conduct the proposed study	
Institute/Department	Research Infrastructure

5. Institutional Compliance/Compatibility with the UGC Minimum Standard for PhD Program

Q1. (Nepalese University) Does the institution you are enrolled in comply with the UGC Minimum

Standard and Procedure for PhD Degree 2073?
(   ) Yes - You are eligible to apply for the UGC PhD Fellowship
(   ) No - You are not eligible to apply for the UGC PhD Fellowship
Q2. (Foreign University) Does your university belong to "Recognized Foreign University" as per the Research Development and Innovation Programs Implementation Guidelines 2021 (Section 1.6.24) ?
(   ) Yes - You are eligible to apply for the UGC PhD Fellowship
(   ) No - You are not eligible to apply for the UGC PhD Fellowship

6. Academic Record (Latest first)

Degree	Year	Major Subjects	Division/ Grade	Percentage (%)	Board/ University

7. Employment Record (Please include complete list in your CV)

Period of service		Designation	Name and address of the institution	Assignments	Permanent/ Temporary	Full Time/ Part Time
From	To					

8. Publication Record (Please attach separate sheet if necessary, include the complete list in your CV)

1. Major Research Publication in **Ranked Journals/Proceedings (SCImago Journal Ranking/JCR Impact Factor)**	
Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year)	Rank*/IF (Year)
1	
2	
3	

2. Major Research Publication in **Non-Ranked Peer-Reviewed Journals**	
Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year)	Country
1	

2		
3		

* For SCImago Rank, visit: http://www.scimagojr.com

9. Previous UGC Grants Received (Please attach a copy of the completion letter)

Year	Program	Title	Period

Q. Do you have any UGC funded research project currently running (incomplete)?

(   ) Yes - You are NOT ELIGIBLE to apply for the UGC PhD Fellowship

(   ) No - You are eligible to apply for the UGC PhD Fellowship

10. Detailed PhD Research Proposal

Please attach your research proposal with the following major components written consistently in any one format (APA, MLA, Chicago, Turabian, Vancouver etc) (limit it to 15-20 pages).

[Important: For the purpose of double blind review, please use the applicant's name only on the cover page and avoid it appearing on the inside page and citations by replacing your name with "●●●"]

Research Proposal format:
(Note: The sequence of the sections can be altered to suit the
        discipline and the research methodology applied)

a. Title
b. Abstract
c. Background
d. Problem Statement
e. Literature Review and Research Gaps
f. Theoretical/Conceptual Framework
g. Conjectures/Hypotheses, Research Questions
h. Research Objectives
i. Study Design, Methods, Tools and Data Analysis
j. Expected Findings
k. Novelty and Level of Contribution of the Study
l. Expected Outputs (Publications)
m. Limitations and Delimitations
n. Ethical/Safety Issues
o. Organization of the Study

> p. Gantt Chart and Detailed Budget (actual)*
> q. References
> r. Association to National Priority** (*explained in a simple language*)

* See Appendix 2.7 for allowable headings and budget outline
** Refer to The Research Development and Innovation Programs Implementation Guidelines 2021 Section 1.15 for the National Priority List

11. Additional Eligibility Check

Q. Have you submitted this proposal in full or in part to any other funding agency?
(   ) Yes - You are NOT ELIGIBLE to apply for the UGC PhD Fellowship now

(   ) No - You are eligible to apply for the UGC PhD Fellowship

12. References

Provide details of TWO referees who may be in better position to explain why you should be considered for this funding. They should not have any family relations with you.

	Referee 1	Referee 2
Name		
Organization		
Designation		
Phone Number		
Email		

13. Documents required (Check √ if included)

1. Copy of Citizenship		8. Copies of first page of research articles with abstract, evidence of peer-reviewed/ranked journals	
2. Appointment letter and job certificates (for faculty)		9. Curriculum Vitae of the Applicant	
3. Proposal acceptance letter and registration receipt .		10. Nomination letter and curriculum vitae of the principal supervisor	
4. Copy of Certificate of Underprivileged Group (if any)		11. Certification of 'No Support from Other Source'* (if available now)*	
5. Copies of Academic Diplomas (Masters and above)		12. Certificate of Study Leave (for faculty) if available now	
6.Copy of Equivalence Certificate (if any		13. PhD Research proposal (1 hard copy +1 digital copy)	
7. Previous UGC Support Certification (if any)		14. Student identity card (if any)	

* Certification from Supervisor or Head of the Host Institution stating that the applicant has not received any financial support for PhD program from any other source

14. Confirmation by the University/Department Where Ph.D. Proposal Has Been Registered

We certify that statements made above by the candidate have been verified and found true. If the applicant is selected for fellowship, he/she will be provided with available resources, facilities and guidance necessary to conduct and complete the proposed research in this institution. We also acknowledge that the UGC Ph.D. Fellowship will consist of a monthly allowance and support to certain educational expenses for three years to the fellow, and a PhD Research Support (only for Nepalese University or research carried out in Nepal) to support the research project of the fellow.

We reaffirm that the PhD program in our institute fully complies with the UGC Minimum Standard and Procedure for PhD Degree 2073.

Name of the host Institution/Department: . . . .

[Official Seal]

_____	_____
Signature	Signature
Name:	Name: . . . .
Designation:.	Designation:. . . . .
Date:	Date: . . . .
(PhD Supervisor)	(Head of the Host Department)

15. Attestation by the Head of the Employing Agency (for Faculty Category)

It is to certify that statements made above have been verified and found true. If the applicant is selected for the UGC PhD fellowship and research support, he/she will be provided with study leave from our institution to complete the program.

Name of the Employing Institution: . . . .

[Official Seal]

_____
Signature
Name: . . . .
Designation: . . . .
Date: . . . .

16.Undertaking by the Applicant

I hereby declare that I have read (a) The UGC Minimum Standard and Procedure for PhD/MPhil Degree, 2073, (b) The UGC Policy and Procedure against Research Misconduct, and (c) The UGC Funding Policies of The Research Development and Innovation Programs Implementation Guidelines 2021, and agree to the conditions and my obligations as an applicant. I solemnly affirm that the information I have provided are true and the research proposal I have submitted is original and has not been submitted in full or in part to any other agency seeking a grant. Any research misconduct on my part and the information provided found false at any moment, I shall be liable to disciplinary action, which may result in termination of Fellowship funding and/or rejection of application.

_____
Signature
Name: . . . .
Date: . . . .

Thumb	
Right	Left

<div align="center">

अनुसूची – ३

</div>

<div align="center">

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal
RESEARCH DIVISION

MF-1

Application for the UGC MPhil Fellowship
<u>Incomplete application will not proceed for evaluation</u>

</div>

Affix a passport size color photo

Faculty		Young	

To be filled by the UGC
Draft No./Bill No. of Rs. 200/-
Deposit:
Date:
Verified by:

1. Personal Information

A1. Applicant's Full Name (capital letter):	A2. Gender:	A3. Age:	A4. Date of Birth:
A5. Last Degree Obtained:	A6. Citizenship No., Issuing District: A6.1: NID No:		A7. Underprivileged Group:
A8. Permanent Address:		A9. Mailing Address:	
A10. Telephone: • Residence: • Office: • Mobile:	A11. Email:		A 12. Employment: • Designation: • Institution: • Address:

2. Information about MPhil. Program Registered

B1. University:	B2. Campus/School:		B3. Department:
B4. Cluster: (Indicate by √)	a. Agriculture/Forestry	e. Education	
	b. Science & Technology	f. Humanities & Social	

			Sciences	
	c. Health Sciences		g. Management	
	d. Engineering			

B5. Registered for Degree:	B6. Subject:	B7: Specialization:
B8. Registration Number:	B9. Date of Registration:	B10. Expected Date of Completion:

3. Institutional Compliance with the UGC Minimum Standard for MPhil Program

Q. Does the institution you are enrolled in comply with the UGC Minimum Standard and Procedure for MPhil Degree 2073?

(   ) Yes - You are eligible to apply for the UGC MPhil Fellowship

(   ) No - You are not eligible to apply for the UGC MPhil Fellowship

4. Academic Record

Degree	Year	Major Subjects	Division/ Grade	Percentage (%)	Board/ University

5. Employment Record (Please include complete list in your CV)

Period of Service		Designation	Name and Address of the Institution	Assignments	Permanent/ Temporary	Full Time/ Part Time
From	To					

6. Publication Record (Please include the complete list in your CV)

1. Major Research Publication in **Ranked Journals/Proceedings (SCImago Journal Ranking/JCR Impact Factor)**		
	Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year)	Rank*/IF (Year)
1		
2		
2. Major Research Publication in **Non-Ranked Peer-Reviewed Journals**		
	Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year)	Country
1		

2		

3.Major Research Reports (any part of it not published in any journal yet)	
	Format: Authors, Title, Submitted Institution (Year)
1	
2	

*For SCImago Rank, visit: http://www.scimagojr.com

7. Previous UGC Grants Received (Please attach a copy of the completion letter)

Year	Program	Title	Period

Q. Do you have any other UGC funded research project currently running?

(   ) Yes - You are NOT ELIGIBLE to apply for the UGC MPhil Fellowship now

(   ) No - You are eligible to apply for the UGC MPhil Fellowship now

8. References
Provide details of TWO referees who may be in better position to explain why you should be considered for this fellowship. They should not have any family relations with you.

	Referee 1	Referee 2
Name		
Organization		
Designation		
Phone Number		
Email		

9. Documents Required (Check √ if included)

1. Copy of Citizenship		5. Copy of Job Certificate (for faculty)	
2. Copies of Academic Diplomas (Masters and above)		6. Curriculum Vitae	
3. Copy of Equivalence Certificate (if any)		7. Certification of 'No Support from Other Source'*	
4. Copy of Certificate of Underprivileged Group (if any)		8. Copies of First Page of Research Articles with Abstract (if any)	

*Certification from Head of the Host Institution stating that the applicant has not received any financial support for MPhil program from any other source

10. Confirmation by the University/Department Where MPhil Candidate Has Been Registered
We certify that statements made above by the candidate have been verified and found true. If the applicant is selected for the fellowship, he/she will be provided with available resources, facilities and guidance necessary to conduct and complete the research requirement of the program in this institution.
We reaffirm that the PhD program in our institute fully complies with the UGC Minimum Standard and Procedure for MPhil Degree 2073.

Name of the Institution/Department: . . . .

[Official Seal]

_____
Signature
Name: . . . .
Designation:. . . . .
Date: . . . .
(Head of the Institution/Department)

11. Attestation by the Head of the Employing Agency.
It is to certify that statements made above have been verified and found true. If the applicant is selected for the UGC MPhil fellowship, he/she will be provided with study leave from our institution to complete the program.

Name of the Employing Institution: . . . .

[Official Seal]

_____
Signature
Name: . . . .
Designation:. . . . .
Date: . . . .

12
    Undertaking by the Applicant
I hereby declare that I have read (a) The UGC Minimum Standard and Procedure for PhD/MPhil Degree 2073, (b) The UGC Policy and Procedure against Research Misconduct, and (c) The UGC Funding Policies of The Research Development and Innovation Programs Implementation Guidelines 2021, and agree to the conditions and my obligations as an applicant. I solemnly affirm that the information I have provided are true. Any research misconduct on my part and the information provided found false at any moment, I shall be liable to disciplinary action, which may result in termination of Fellowship funding and/or rejection of application.

_____
Signature
Name: . . . .
Date: . . . .

Thumb	
Right	Left

अनुसूची − ४

Application Form for the UGC Postdoctoral Fellowship

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal
RESEARCH DIVISION

PDF-1

Affix a passport size color photo

Application for the UGC Postdoctoral Fellowship

A. Personal Information

Name of Applicant:	Gender:	Date of Birth:
Nationality:	Citizenship No., Issuing District: / Passport No.: NID No:	
Mailing Address:	Permanent Address:	
Telephone No(s).:	Email(s)	

B. Research Project:

Title of the Project:		
Funding Agency:	Award No.:	Funded Period:
Name of the Principal Investigator:	Host Institution and Address:	
Designation:		
Date of Appointment:		

C. Postdoctoral Position:

Accepted by:		
Date of Acceptance:	Period accepted for:	Tentative Starting Date:

D. Academic Record:

Degree	Major Subjects	Year	University

E. Title of Ph.D. Thesis:

F. Publication Record (Give complete list in your CV):

List major three articles published in Ranked journals:

G. Employment Record (Last two jobs, if any; give complete list in your CV):

Period	Designation	Organization

H. References (Referees you included in your application to the PI or the host institution):

	Referee 1	Referee 2
Name		
Organization		
Designation		
Phone No.		
Email:		

I. Documents Required (Check √ if included)

1. Copy of Citizenship/Passport		5. Curriculum Vitae	
2. Diploma of Masters to Ph.D. degrees		6. Copies of First Page of Research Articles with Abstract (if any)	
3. Acceptance Letter by the Principal Investigator		7. Certificate of Previous Jobs (if any)	
4. No Objection Letter from the Host Institution		8. Covering Letter	

J. Undertaking by the Applicant:

I hereby declare that I have read (a) *The UGC Policy and Procedure against Research Misconduct*, and (b) The UGC Funding Policies of The Research Development and Innovation Programs Implementation Guidelines 2021, and agree to the conditions and my obligations as an applicant. I solemnly affirm that the information I have provided are true.
.
Applicant's Signature: _____

Thumb Print	
Right	Left

[Note: Application submitted electronically is acceptable. In such case, a hardcopy of the application form with applicant's signature and thumb print along with fee should be submitted to the UGC before joining the appointed institution.]

अनुसूची – ५

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal
RESEARCH DIVISION

PSP-1

Affix a passport size color photo

Partial Support for the PhD Fellows Application

<u>Incomplete application will not proceed for evaluation</u>

A. Personal Information

A1. Applicant's Full Name (capital	
A2. Gender:	
A3. Date of Birth:	
A4. Citizenship No., Issuing	
A41. NID No:	
A5. Permanent Address:	
A6. Mailing Address:	
A7. Cell/Telephone:	
A8. Email:	

B. Information about the Program registered

B1. University:	
B2. Department:	
B3. Subject:	
B4. Specialization (if any)	
B5. University Registration Number:	
B6. Date of Registration:	
B7. Date of Proposal Approved:	
B8. Title of the Research:	
B9. Date of Viva Voice (if any)	

C. Information About the Principal Supervisor

C1. Name of Supervisor:	
C2 Current Position :	
C3. Highest Degree Obtained:	

C4. Service period at the current position:	
C5. Cell/Telephone of Supervisor	
C6. Email:	
C7. Total No. of Publications in Ranked journals (with SCImago Journal Rank or JCR Impact Factor)	
C8. Total No. of Publications in non-Ranked journals (Non-ranked peer-reviewed journals)	

D. Request for Support made

SN	Support	Amount	Request for support made (Indicate by √)
1	Field study	NRs.40,000	
2	Study material		
3	Printing	NRs.20,000	

E. Institutional Compliance/Compatibility with the UGC Minimum Standard for PhD

Q. (Nepalese University) Does the institution you are enrolled in comply with the UGC Minimum Standard and Procedure for PhD Degree 2073?

(   ) Yes - You are eligible to apply for the UGC PhD Fellowship

(   ) No - You are not eligible to apply for the UGC PhD Fellowship

Q. (Foreign University) Is the institution you are enrolled in compatible with the UGC Minimum Standard and Procedure for PhD Degree 2073 ?

(   ) Yes - You are eligible to apply for the UGC PhD Fellowship

(   ) No - You are not eligible to apply for the UGC PhD Fellowship

F. Academic Record

Degree	Year	Major Subjects	Division/ Grade	Percentage (%)	Board/ University
MPhil					
Master					

G. Publication Record

1. Research Publication in **Ranked/Peer-Reviewed Journals/Proceedings**		
	Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year)	Rank*/IF (Year)
1		

2		
3		

H. References

Provide details of TWO referees who may be in better position to explain why you should be considered for this funding. They should not have any family relations with you.

	Referee 1	Referee 2
Name		
Organization		
Designation		
Phone Number		
Email		

I. Documents Required (Check √ if included)

1. PhD Research Proposal accepted by University		5. Recommendation Letter from Supervisor	
2. Copy of Citizenship		6. Certification of 'No Support from Other Source'*	
3. Copies of Academic Diplomas (Masters and above)		7. Curriculum Vitae	
4. Copy of Equivalence Certificate (if any)		8. Field Visit Plan/Study Material List	

*Certification by Supervisor or Head of the institution stating that the applicant has not received any financial support for PhD program from any other source.

J. Endorsement by the Department and the Supervisor

We certify that statements made above by the candidate have been verified and found true. If the applicant is selected for the partial financial support for his/her thesis, he/she will be provided with available resources, facilities and guidance necessary to conduct and complete the proposed research in this institution..

Name of the host Institution/Department: . . . .

[Official Seal]

_____   _____
Signature   Signature
Name: . . . .   Name: . . . .
Designation:. . . . .   Designation:. . . . .
Date: . . . .   Date: . . . .
 (Thesis Supervisor)   (Head of the host department)

K. Undertaking by the Applicant

I hereby declare that I have read (a) The UGC Minimum Standard and Procedure for PhD/MPhil Degree, 2073, (b) The UGC Policy and Procedure against Research Misconduct, and (c) The UGC Funding Policies of The Research Development and Innovation Programs Implementation Guidelines 2021, and agree to the conditions and my obligations as an applicant. I solemnly affirm that the information I have provided are true and the research proposal I have submitted is original and has not been submitted in full or in part to any other agency seeking a grant. Any research misconduct on my part and the information provided found false at any moment, I shall be liable to disciplinary action, which may result in termination of funding and/or rejection of application.

_____
Signature
Name: . . . .
Date: . . . .

Thumb	
Right	Left

अनुसूची – ६

Application form for Masters/MPhil Research Support (Disability Group)

UNIVERSITY GRANTS COMMISSION
RESEARCH DIVISION
Sanothimi, Bhaktapur, Nepal

Affix a passport
size color
photo

Master/MPhil Research Support Application Form
(for Persons with Disabilities)
Incomplete application will not proceed for evaluation

A. Personal Information

A1. Applicant's Full Name (capital letter):	
A2. Gender:	
A3. Date of Birth:	
A4. Citizenship No., Issuing District:	
A41. NID No:	
A5. Permanent Address:	
A6. Mailing Address:	
A7. Cell/Telephone:	
A8. Email:	
A9. Category of Disability:	

B. Information about the Program registered

B1. University:	
B2. Campus/School:	
B3. Department:	
B4. Degree registered for	
B5. Subject:	
B6. Specialization (if any)	
B7. University Registration Number:	
B8. Date of Proposal Approved:	
B9. Title of the Research:	
B10. Date of Viva Voice (if any)	
B11. Name of Supervisor:	
B12. Designation of Supervisor :	
B13. Cell/Telephone of Supervisor	
B14. Email:	

C. Request for Support made

C1. Research Support requested	Masters Thesis Support ( ); MPhil Thesis Support ( )
C2. Support for Assistant (Disability classes 'A' and 'B' only)	Yes ( ) ; No ( )

D. List of UGC and Other Grants received by you.

Year	Grant Program	Project Title	Grants Amount

E. Academic Record

Degree	Year	Major subjects	Division/ CGP	Percentage (%)	School/ Campus, University
+2					
Bachelors degree					
Masters (completed year/semester)I / II /III /IV					

F. Research Publication Record (if any)

Research Publication in Peer-reviewed journal
In APA Format: Author/s (Year), Title, Journal, Volume (Number): First page - Last page 1. 2. 3.

G. Documents required (Check √ if included)

1. Approved Research Proposal	
2. Copy of Citizenship	
3. Copies of Academic Diplomas (Bachelors and above)	
4. Copy of Equivalence Certificate (if any)	
5. Certificate of Disability	
6. Self-declaration of 'No Support from Other Source'	
7. Copies of First Page of Research Articles with Abstract	
8. Recommendation letter from institution and supervisor	

H. Endorsement by the Institution and Supervisor

We certify that the statements made above by the applicant have been verified and found true. He/she is student in this institution. We recommend to provide him/her thesis preparation support as per the rule of University Grants Commission.

Name of the Institution/Department: . . . .

[Official Seal]

_____   _____
Signature   Signature
Name: . . . .   Name: . . . .
Designation:.   Designation:. . . . .
Date: . . . .   Date: . . . .
(Thesis Supervisor)   (Head of the Institution/Department)

I. Undertaking by the applicant

I hereby declare that I have read (a) The UGC Minimum Standard and Procedure for MPhil Degree 2073, (b) The UGC Policy and Procedure against Research Misconduct, and (c) The UGC Funding Policies of The Research Development and Innovation Programs Implementation Guidelines 2021, and agree to the conditions and my obligations as an applicant. I solemnly affirm that the information I have provided are

true and the research proposal I have submitted is original and has not been submitted in full or in part to any other agency seeking a grant. Any research misconduct on my part and the information provided found false at any moment, I shall be liable to disciplinary action, which may result in termination of funding and/or rejection of application.

_____
Signature
Name: . . . .
Date: . . . .

अनुसूची – ७

Application Form for the UGC Research Grant for Faculty Members (Generic)

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal
RESEARCH DIVISION
UG-1

Affix a
passport
size color
photo

The UGC Research Grant for Faculty Members Application Form
Incomplete application will not proceed for evaluation

You are Applying for:		Application Fee (Only for PI)		Filled by the UGC
1. The UGC Collaborative Research Grant (3 Years)		Rs. 1000		Draft No./Bill No.
2. The UGC Faculty Research Grant (2 Years)		Rs. 500		Date:
3. The UGC Small RDI Grant (1 Year)		Rs. 100		Verified by:

You are Applying as		Type of the Support Requested:	
1. Principal Investigator (PI)		1. Full Grant (the UGC bears the full cost)	
2. Co-Investigator (Co-I)		2. Matching Grant (I have a co-funding sponsor)	

Important: Number of Investigators required

1. The UGC Collaborative Research Grant (3 Years): Principal Investigator and at least 2 Co-Investigators
2. The UGC Faculty Research Grant (2 Years): Principal Investigator and at least 1 Co-Investigator
3. The UGC Small RDI Grant (1 Year): Principal Investigator; Co-Investigator (optional)

A. Personal Information

A1. Applicant's Full Name:	A2. Gender:	A3. Age:	A4. Date of Birth:
A5. Citizenship No., Issuing District: A5.1. NID No:	A6. Underprivileged Group:	A7. Email(s):	
A8. Permanent Address:	A9. Mailing Address:	A10. Contact Telephone Res: Office: Mobile:	
A11. University:	A14. Address of Institution:	A15. Designation:	
A12. Campus/School:		A16. Subject:	
A13. Department:		A17. Specialization:	

B. Information about the Proposed Study

B1. Proposed Title of the Study:				

B2. Cluster: (Indicate by √)	a. Agriculture/Forestry		e. Education	
	b. Science & Technology		f. Humanities & Social Sciences	
	c. Health Sciences		g. Management	
	d. Engineering			

B3. Subject:	B4. Specialization:	B5. Proposed Period of Study

B6. Proposed Budget:	B7. No. of Investigators:	B8. No. of Students included (<u>for theses</u>):			
		PhD	MPhil	Masters	Bachelors

B9. Co-Investigators (each Co-Investigator should submit separate application form)		
Name of Co-Investigator(s)	Current Institution/Department (Indicate on the right with √, if the institution is a Community Campus)	
1.		
2.		
3.		
4.		
5.		

B10. Role of Individual Investigators
[Please attach a document with a brief description of the proposed role of the Principal Investigator and each Co-Investigators included above in the proposed study]

B11. Postdoctoral Position Requested (If any)
[The UGC might provide funding to hire a postdoctoral fellow for the Collaborative Research on the basis of need. If you would like to request for this assistance, please state and explain your need and request]

C. Research Infrastructure of Institutions

List the relevant research infrastructure in your institution(s) to conduct the proposed study	
Institute/Department	Research Infrastructure

D. Academic Record (Bachelors Master level and above)

Degree	Year	Major Subjects	Grade	Board/University

E. Employment Record (Please include appointment letter and experience letter complete list in your CV)

Period of service		Designation	Institution	Remarks
From	To			

F. Publication Record (Please attach separate sheet if necessary include the complete list in your CV)

1. Major Research Publication in **Ranked Journals/Proceedings (SCImago Journal Ranking/JCR Impact Factor)**		
	Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year)	Rank*/IF (Year)
1		
2		
3		
2. Major Research Publication in **Non-Ranked Peer-Reviewed Journals**		
	Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year)	Country
1		
2		
3		
4		

3. Academic Research Supervision (**Please attach separate sheet if necessary**)			
	Level (PhD/ MPhil/ Master)	Title	Completion Year (Viva Voice Date)	Name of Student
1			
2			
3			

4. Research Methodology Training (**Please include copy of certificate**)			
	Organizer	Title	Duration	Date
1				

*For SCImago Rank, visit: http://www.scimagojr.com

G. List of the UGC and Other Research Grants Received by you (Please attach a copy of award and the completion letter)

Year	Agency	Program	Title	Period

Q. Do you have any other UGC funded research project currently running?

(   ) Yes - You are NOT ELIGIBLE to apply for the UGC Research Grant now

(   ) No - You are eligible to apply for the UGC Research Grant now

H. Research Proposal

Please attach your research proposal with the following major components written consistently in any one format (APA, MLA, Chicago, Turabian, Vancouver etc) (limit it to 15-20 pages).

[Important: For the purpose of double blind review, please use the applicant's name only on the cover page and avoid it appearing in the inside page and citations by replacing your name with "●●●"]

H1. Use the following format for RESEARCH PROPOSAL

Research Proposal format:
(Note: The sequence of the sections can be altered to suit the
   discipline and the research methodology applied)
a. Title
b. Abstract
c. Background
d. Problem Statement
e. Literature Review and Research Gaps
g. Foundational/Preliminary Work (*done by any team member, if any*)
f. Theoretical/Conceptual Framework
g. Conjectures/Hypotheses, Research Questions
h. Research Objectives
i. Study Design, Methods, Tools and Data Analysis
j. Expected Findings
k. Novelty and Level of Contribution of the Study
l. Expected Outputs (Student Training and Publications)
m. Limitations and Delimitations
n. Ethical/Safety Issues
o. Organization of the Study
p. Gantt Chart and Detailed Budget*
q. References
r. Association to National Priority** (*explained in a simple language*)

*See Appendix 3.3 for allowable headings and budget outline
** Refer to The Research Development and Innovation Programs Implementation Guidelines 2021, Section 1.15, for the National Priority List

H2. Use the following format for DEVELOPMENT/INNOVATION PROPOSAL

Development/Innovation Proposal Format
(Note: The sequence of the sections can be altered to suit the
    discipline and the project)

a. Purpose
b. Abstract
c. Background/Context/Problem
d. Literature Review
e. Theoretical/Technical Aspect
f. Significance of the Development/Innovation
g. Foundational/ Preliminary Work (*done by any team member, if
    any*)
h. Development/Innovation Goal/ Objectives
i. Design / Methodology and Verification
j. Expected Product
k. Limitations and Delimitations
l. Ethical/Safety Issues
m. Organization of the Final Report
n. Gantt Chart and Detailed Budget* (actual)
o. Bibliography
p. Association to National Priority** (*explained in a simple
    language*)

*See Appendix 3.3 for allowable headings and budget outline
** Refer to The Research Development and Innovation Programs Implementation Guidelines 2021, Section
    1.15, for the National Priority List

I. Additional Eligibility Check

Q1. Have you submitted this proposal in full or in part to any other funding agency?

(   ) Yes - You are NOT ELIGIBLE to apply for the UGC Research Grant now

(   ) No - You are eligible to apply for the UGC Research Grant now

Q2. Have you submitted any other application beside this one for any UGC research grant in the
    current season?

(   ) Yes - You can not apply for more than one UGC research grant at one time. STOP HERE.

(   ) No - You are eligible to apply. PLEASE PROCEED.

J. References
Provide details of TWO referees who may be in better position to explain why your team should be
considered for this funding. They should not have any family relations with you.

	Referee 1	Referee 2
Name		
Organization		
Designation		
Phone Number		
Email		

K. Documents required (Check √ if included)

1. Detailed Research Proposal (1 copy + 1 digital copy)		7. Copies of First Page of Research Articles with Abstract and an evidence of Rank/Peer-Reviewed Journal (if any)	
2. Copy of Citizenship		8. Curriculum Vitae	
3. Copy of appointment letter and Job Certificate		9. Applications from Co-Investigators	
4. Copies of Academic Diplomas (Masters and above)		10. Previous UGC Grant Certification (if any)	
5. Copy of Equivalence Certificate (if any)		11. Proposed Roles of the Proposed Investigators	
6. Copy of Certificate of Underprivileged Group (if any)		12. Research completion letter/Thesis supervision letter	

L. Institutional Endorsement (from all institutions where the study will be conducted):

Statement of Endorsement: The Principal Investigator and Co-Investigators of the proposed study are faculty members in our institutions and are qualified to conduct the proposed study. We confirm for the institutional approval and support to the team in conducting the proposed study at our institutions, if the project is selected for funding from the UGC.		
1. From the Institution of the Principal Investigator		
Name: Designation: Institution: Address:	Signature	Official Seal
2. From the Institution of a Co-Investigator (If different than above)		
Name: Designation: Institution: Address:	Signature	Official Seal
3. From the Institution of a Co-Investigator (If different than above)		
Name: Designation: Institution: Address:	Signature	Official Seal

Note: Add additional rows, if necessary.

M. Undertaking by the Applicant:

I hereby declare that I have read (a) The UGC Minimum Standard and Procedure for PhD/MPhil Degree, 2073, (b) The UGC Policy and Procedure against Research Misconduct, and (c) The UGC Funding Policies of The Research Development and Innovation Programs Implementation Guidelines 2021, and agree to the conditions and my obligations as an applicant. I solemnly affirm that the information I have provided are true and the research proposal I have submitted is original and has not been submitted in full or in part to any

other agency seeking a grant. Any research misconduct on my part and the information provided found false at any moment, I shall be liable to disciplinary action, which may result in termination of research funding and/or rejection of application.

_____
Signature
Name: . . . .
(Principal Investigator / Co-Investigator)
Date: . . . .

Thumb	
Right	Left

Application Form for the Included Student

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal
RESEARCH DIVISION
RG-S

Affix a passport size color photo

The UGC Small RDI/Faculty/Collaborative Research Grant
Application by Student
(to be submitted at the time of Research Grant Award)

A. Personal Information

A1. Applicant's Full Name (Student):		A2.Gender:	A3. Age:	A4. Date of Birth:
A5. Citizenship No., Issuing District: A5.1: NID No:		A6. Underprivileged Group:	A7. Email(s):	
A8. Permanent Address:		A9. Mailing Address:		A10. Contact Telephone Res: Office: Mobile:
A11. University:		A14. Address of Institution:		A15. Degree registered:
A12. Campus/School:				A16. Subject:
A13. Department:				A17. Specialization:

B. Information about the Proposed Study

B1. Type of the UGC Research Grant applied by the Principal Investigator (indicate by √)					
Collaborative Research		Faculty Research		Small RDI	
B2. Proposed Title of the Study:					
B3. Period of Study:	B4. Proposed Budget:		B5. No. of Investigators:		B6. No of Students:

B7. Research Team (PI, Co-I and students should submit separate application form)		
Name of Principal Investigator	Role	Current Institution/Department
Name of Co-Investigator/s (if any)	Role	Current Institution/Department

Name of Student/s	Registered for Degree	Current Institution/Department

C. Academic Record of Student

Degree	Year	Major Subjects	Grade	Board/University

D. Employment Record of Student (Please include complete list in your CV)

Period of service		Designation	Institution	Remark
From	From			

E. Publication Record of Student (Please include the complete list in your CV)

1. Major Research Publication in **Ranked Journals/Proceedings (SCImago Journal Ranking/JCR Impact Factor)**		
	Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year)	Rank*/IF (Year)
1		
2		
2. Major Research Publication in **Non-Ranked Peer-Reviewed Journals**		
	Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year)	Country
1		
2		

*For SCImago Rank, visit: http://www.scimagojr.com

F. List of UGC and Other Research Grants awarded to you (Please attach a copy of the completion letter)

Year	Program	Title	Period
Q. Do you have you any other UGC funded research project currently running?			

(	) Yes - You are NOT ELIGIBLE to apply for the UGC Research Support now
(	) No - You are eligible to apply for the UGC Research Support now

G. References

Provide details of TWO referees who may be in better position to explain why you and your team should be considered for this funding. They should not have any family relations with you.

	Referee 1	Referee 2
Name		
Organization		
Designation		
Phone Number		
Email		

H. Documents required (Check √ if included)

1. Copy of Citizenship		4. Copy of Certificate of Underprivileged Group (if any)	
2. Copies of Academic Diplomas (Bachelors and above)		5. Copies of First Page of Research Articles with Abstract (if any)	
3. Copy of Equivalence Certificate (if any)		6. Curriculum Vitae	

I. Endorsement by the Principal Investigator

I affirm that the applicant is the student included in the research project led by me, for his/her Bachelors / Masters / MPhil / PhD thesis. I / my team will supervise the student for the thesis as per the requirement of the Institution in which the student is enrolled for the program.

_____
Signature
Name: . . . .
Date: . . . .

J. Undertaking by the Applicant:

I hereby declare that I have read (a) The UGC Minimum Standard and Procedure for PhD/MPhil Degree, 2073, (b) The UGC Policy and Procedure against Research Misconduct, and (c) The UGC Funding Policies of The Research Development and Innovation Programs Implementation Guidelines 2021, and agree to the conditions and my obligations as an applicant. I solemnly affirm that the information I have provided are true.

_____
Signature
Name: . . . .
Date: . . . .

Thumb	
Right	Left

Application Form for the UGC Support for Publication of Research Article

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal
RAPS-1

Affix a passport
size color
photo

Research Article Publication Support
(Reimbursement of Publication/Handing Fee charged by the Journal with *JCR Impact Factor* or *SCImago Journal Ranking*)

A. Applicant's Personal Information

A1. Applicant's Full Name:		A2. Gender:	A3. Date of Birth:
A4. Citizenship No., District: A4.1: NID No:	A5. Underprivileged Group*:		A6. Contact Email:
A7. Permanent Address:	A8. Mailing Address:		A9. Contact Telephone Residence: Office: Mobile:
A10. University: A11. Campus/School: A12. Department:	A13. Address of Institution:		A14. Designation: A15. Subject: A16. Specialization:

* Underprivileged Group: Woman, Dalit, Janajati, Madhesi, Person with Disability and Residence/Working in Remote District.

B. Information about the Publication

B1. Title of the Research Article:
B2. Type of Research Article: Original Research Article (__)   Review Article (__)   Other (__)
B3. Name of the Journal, Volume, Issue, Pages, Year:

B4. Country of Publication:	B5. Contact Person:	B6. Email of Contact Person:

B7. Link to the Article/Abstract/DOI:

C. Information about Payment

C1. Did you make a request in writing to the publisher for a fee waiver? Yes (___)   No (___) If No, please make a request once.
C2. Publisher's Response to Your Request for Fee Waiver was:

C3. Amount of Fee Paid to the Publisher	
In Foreign Currency:	Equivalent in Nepalese Rupees:

C4. Proof of Payment (Documents submitted herewith)

C5. Amount of Reimbursement You Are Requesting to the UGC
In Nepalese Rupees:

D. Source Research Project

D1. Title of the Research Project:	
D2. Funding Agency:	D3. Type of Grant/ Grant No.:
D4. Date of Award:	D5. Project Period:
D6. Any Publication/ Presentation made previously: Yes (___) No (___)	
D7. If Yes, List of the Previous Publication/ Presentation:	

E. Document Checklist (Indicate by √)

1. Completed Application Form	√
2. Manuscript/Copy of the Article	
3. Acceptance Letter from the Publisher	
4. Printed Record of JCR Impact Factor or SCImago Ranking of the Journal	
4. Email Communication (regarding Fee Waiver)	
5. Proof of Payment	
6. A Copy of Certificate of Citizenship	
7. A Copy of Certificate of Underprivileged Group (if applicable)	
8. Any other document (specify)	

F. Endorsement by the Institutional Head

I certify that the Applicant carried out the research in our institution and wrote the research article based on that research. I also certify that the statements made above by the Applicant have been verified and found true. I recommend the UGC for providing the requested financial support to the Applicant.

Name: _____   Signature: _____

Designation: _____   Date: _____

Email: _____   Phone No: _____

Name of the Institution: _____

Address: _____

Official Seal

G. Undertaking by the Applicant

I hereby undertake and affirm that:

- The substance of the research article submitted is based on the original research conducted by me / us. In case any fabrication, falsification or plagiarism is proved, apart from the

penalties as per the policy and procedure of the UGC, I would refund the entire amount of the support.
- I have made a request to the publisher for waiver of the publication/handling fee before finalizing the payment.
- All the information provided above is true to the best of my knowledge and belief.

Name: _____   Signature: _____

Designation: _____   Date: _____

<div align="center">

अनुसूची – ८.१

Application Form for the UGC Support for patenting the research outcomes

</div>

	UNIVERSITY GRANTS COMMISSION Sanothimi, Bhaktapur, Nepal	Affix a passport size color photo

Support for patenting the research outcomes

(Reimbursement of Patenting and Handing Fee charged by the Patenting institutions)

A. Applicant's Personal Information

A1. Applicant's Full Name:		A2. Gender:	A3. Date of Birth:
A4. Citizenship No., District: NID No:	A5. Underprivileged Group*:		A6. Contact Email:
A7. Permanent Address:	A8. Mailing Address:		A9. Contact Telephone Residence: Office: Mobile:
A10. University: A11. Campus/School: A12. Department:	A13. Address of Institution:		A14. Designation: A15. Subject: A16. Specialization:

* Underprivileged Group: Woman, Dalit, Janajati, Madhesi, Person with Disability and Residence/Working in Remote District.

B. Information about the Patenting

B1. Title of the Research Article:		
B2. Type of patenting:		
B3. Name of the Patenting Institution:		
B4. Country of Patenting:	B5. Contact Person:	B6. Email of Contact Person:
B7. Link to patenting:		

C. Information about Payment

C1. Did you make a request in writing to the patenting institutions for a fee waiver?   Yes (___)   No (___) If No, please make a request once.
C2. Patenting institutions Response to Your Request for Fee Waiver was:
C3. Amount of Fee Paid to the institution   In Foreign Currency: Equivalent in Nepalese Rupees:
C4. Proof of Payment (Documents submitted herewith)
C5. Amount of Reimbursement You Are Requesting to the UGC   In Nepalese Rupees:

D. Source Research Project

D1. Title of the Research Project:	
D2. Funding Agency:	D3. Type of Grant/ Grant No.:
D4. Date of Award:	D5. Project Period:
D6. Any Publication made on this research previously: Yes (___) No (___)	
D7. If Yes, List of the Previous Publication/ Presentation:	

E. Document Checklist (Indicate by √)

1. Completed Application Form	√
2. Patent registration letter	
3. Email Communication (regarding Fee Waiver)	
4. Proof of Payment	
5. A Copy of Certificate of Citizenship	
6. A Copy of Certificate of Underprivileged Group (if applicable)	
7. Any other document (specify)	

F. Endorsement by the Institutional Head

I certify that the Applicant carried out the research in our institution and applied for patenting of his/her research outcomes. I also certify that the statements made above by the Applicant have been verified and found true. I recommend the UGC for providing the requested financial support to the Applicant.

Name: _____   Signature: _____

Designation: _____   Date: _____

Email: _____   Phone No: _____

Name of the Institution: _____

Address: _____

Official Seal

G. Undertaking by the Applicant

I hereby undertake and affirm that:

- The substance of the patenting submitted is based on the original research conducted by me / us. In case any fabrication, falsification or plagiarism is proved, apart from the penalties as per the policy and procedure of the UGC, I would refund the entire amount of the support.
- I have made a request to the patenting institutions for fee waiver before finalizing the payment.
- All the information provided above is true to the best of my knowledge and belief.

Name: _____   Signature: _____

Designation: _____   Date: _____

To be Filled by the UGC Official:

Title of the Article:

_____

_____

_____

_____

Name of Journal: _____

SCImago Journal Ranking for the Year _____ is _____

JCR Impact Factor for the Year _____ is _____

Requested Fund: _____

Approved Fund: _____

Approved by: _____

If rejected, the reason is: _____

Date: _____

Signature: _____

Application form for supporting the establishment of center of excellence

University Grants Commission
Sanothimi, Bhaktapur, Nepal

Support for the establishment of center of excellence

Proposal Outline
1. Center of Excellence for: ………………..
2. Name of the Institute:
3. Detailed address of the Institute:
4. Type of University/Academy: Government/Private
5. Self-Study Report (SSR) approval or Quality Assurance and Accreditation approval date (if any):
6. Year of Establishment of the Institute:
7. Name of the Head of the Institution:
8. Proposed Cost:
9. Capability Of The Organization
   a) Infrastructure (List of land/building/lab equipment)
   b) List of faculties/Expertise/support staff Available
   c) Status of ongoing Projects of the Institute, if any:

Year	Title	Funding body	Grants	Status

10. Technical details
    a. Infrastructure, facilities and IT support
    b. Mission, Vision, Goals and Objectives
    c. Components of University
    d. Curriculum Development and instruction
    e. Specific priorities area
    f. Strengths Learnings Opportunities and Challenges (SLOC) analysis
    g. Resource mobilization and sustainability plan for next five years
    h. National and International Collaborations
    i. Publications (Last 5 years in relevant areas)
    j. Rules and regulations
    k. Governance mechanism
    l. Academic output (Last 5 years) in relevant areas

11. Outputs and Deliverables

(Infrastructure development, academic activities, research outputs, publications, social impact, innovation and patenting)

Work package (WP)	Activities	Duration	Budget	Expected output
WP1				
WP2				

Funding and Duration

Number of awards:

The number of awards shall be determined by UGC

Budget:

The available budget shall be allocated by UGC

Duration:

Two year, with possibility of extension as per the rules of UGC.

Eligibility:

Nepali Universities and equivalent bodies shall be eligible to submit the proposal to establish CoE. Preference shall be given to accredited institutions or institutions with Self Study Report (SSR) have been approved by UGC. Application procedure:

- Application charge Rs. 1000 must be deposited in Rastriya Banijya Bank, account number 170000021401
- HEIs should submit the application through their universities to the UGC. Application should consist of one hard copy and a soft copy of the proposal.
- The application should be approved by the **Executive Committee** and endorsed from the Office of the Vice Chancellor.
- One university can submit maximum of two proposals for two Departments and/ or Schools. Two or more disciplines are encouraged to submit integrated CoE proposals.
- The proposals shall be evaluated by independent reviewer. The proposal must obtain at least 50% score in the evaluation format prescribed by UGC for further consideration.
- The shortlisted HEIs shall be called for presentation before the Panel of Experts (POE) formed by UGC.
- Shortlisted proposals shall be evaluated by a POE and UGC Officials after the presentation made by the HEIs.
- Final decision shall be made by UGC research council.

Evaluation criteria:

The proposal shall be evaluated by a team of experts. Following indicators are used for the evaluation process:

- Mission, Vision, Goals and Objectives of CoE
- Organization Structure
- Curriculum Development and Instruction
    - Latest curriculum revised
    - Project based teaching learning modalities
    - Practical based teaching learning modalities
    - Academic program either annual or semester practiced
- State of Infrastructure, Facilities and IT support
    - Strength of faculty
    - Exiting infrastructure
    - Teaching learning tools: an harmonized approach in Examination system

- International practices in academic program ie semester system in bachelor as well.
- Specific priorities area of the University and of the CoE
- SLOC analysis of University/Department/School where the COE is being established
- An innovative and feasible center plan in terms of globally competent in research and innovation
- Resource mobilization and sustainability plan for next five years
- Plan for Infrastructural arrangements
- National and International Collaborations
- Institutional Outreach/publications
- Rules and regulations
- Governance mechanism
- Previous experiences and achievements

Governance as prerequisite

- Higher Education Institutions (HEIs) shall have independence in academics and administrations towards the host departments/schools and their collaborating units. Other additional fundamental indicators for establishing CoE includes: long-term viability, governance mechanism, self-direction and commitment to academic values.
- The CoE center should have established its own **autonomous** Governing Board as per the rules of the institution.

Announcement of Result

- The award notice shall be published in the UGC website.

Code of conduct

- The UGC is fully committed to the principle of honesty, integrity, and fair play in the conduct of its grant disbursement. All application should comply with the UGC code of conduct.

अनुसूची − ९

APPLICATION FORM FOR ORGANIZING TRAINING PROGRAMS

Check with *	Type of the Program	Duration (at least for 3 days)
	Refresher Course	
	Capacity Development Trainings	
	Research Trainings/Lab training	

A. INSTITUTIONAL STATUS

Name of the Institution:		Affiliated University:

Contact Address	District:	VDC/Municipality/Metro:	Ward No:
	Phone:	Fax:	Email:

Head of the Institution	Name:
	Position: Contact no (Mobile):
	Email

Focal person	Name:
	Position: Contact no (Mobile):
	Email

Academic programs currently being offered	Programs	Total number of students
	1.	
	2.	
	3.	
	4.	
	5.	

	Full Time	Part Time
Total number of faculty involved in teaching		
Total number of faculty with Post Doctorate		
Total number of faculty with PhD		
Total number of faculty with MPhil		
Total number of non-teaching staffs		

B. AVAILABLE INSTITUTIONAL FACILITIES FOR TRAININGS

(Please quantify)

SN	Particulars	Remarks

1.	Training hall (capacity) and working space	
2.	Equipment and technologies (computer, MMP, audio-visual, OHP, printer, photocopier etc.)	
3.	Utility and support services	
4.	Administrative resources	
5.	Proposed Resource persons	
6.	Number of faculty members ongoing MPhil, PhD, and Postdoctoral level studies	
7.	Number of trained resource persons to conduct the proposed program	
8.	Collaborative approach for the program, If any	

C. Information about the Program

C1. Full Title of the Program		C2. Duration (at least 3 days)
C3. Individual Sessions		
Title of the Session	Duration (hour)	Proposed Resource Person (attach brief CV separately)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
(add rows to add more sessions)		

Program conducted with UGC support in last fiscal year if any:

Title: **Duration: …. days**   **Date:**

D. PLAN OF ACTION (PROPOSAL)

(Prepare separately the detailed documentation)

SN	Particulars	Remarks
1.	Type/Nature of program intended to conduct	
	a. Brief introduction of the program and Relevancy	
	b. Objectives of the program	
	c. Methodology used for conducting the program	
2.	Details of the potential participants and selection method	

3.	Details of the training syllabus/agenda (with detail schedule)
4.	expected outcomes of the program
5.	Program budgeting (Remuneration to experts, logistic support, stationeries, Refreshment, Printing, and contingencies)
6.	Program-wise proposed time and venue
7.	Administrative backup to launch the proposed program/s
8.	Brief CVs of proposed experts

E. Document Checklist

Mark with *	Document Checklist Before Program	Mark with *	Document Checklist after Program
	A cover letter signed by the head of the institution		A cover letter
	Application form with complete information		Narrative Report (Background information, objectives/outcomes, detail schedule, training methodology/delivery, outputs, conclusion and recommendations)
	Proposal		Photograph, Attendance sheet, Template Certificate if applicable
	Other evidences mentioned in the application form		Approved statement of expenditure details, Name of Bank, Account Number and Branch

F. Undertaking by the applicants

I certify that the statements made above have been verified and found true. If the grant is provided, I shall solely be responsible for its proper utilization of the fund.

Name of the Head of Institution: _____

Signature: _____   date: _____

official seal:

Application form for Seminar/Conference/Symposium/Workshop/Dialogue

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal

Application form for Seminar/Conference/Symposium/Workshop/Dialogue

Check with *	Type of the Program	Duration (days)
	Seminar	
	Workshop	
	Conference/symposium	
	Academic-Industry Dialogue	

Check with *	Level of the Program	Duration (days)
	Local/regional	
	National	
	International	

1. General Information of Institution

University/University affiliated to	
Name of the institution (Campus/Department/School/Faculty) , Adress	
Contact no	
Email	
Name of the institution head	
Designation	
Contact no (Telephone/Mobile)	
Email	
Program Coordinator	
Designation	
Contact no (Telephone/Mobile)	
Email	

Academic programs currently being offered	Programs	Total number of students
	1.	
	2.	
	3.	
	4.	
	5.	

Total number of faculty involved in teaching	Full Time	Part Time
Total number of faculty with Post Doctorate		
Total number of faculty with PhD		
Total number of faculty with MPhil		
Total number of Non-Teaching staffs		

2. Program Detail

Area of program	Science/Engineering/Agriculture/Medicine/Nursing/ Humanities/Law/Management/Education/………………..
Proposed Date	
Title of program	
Venue of program	
Total expected no. of participants (Host and others)	
Type of the participants	
Collaboration with other institutions	
No. of invitees (National & International) (Please attached a list of all possible invitees)	
Registration Fee, If applicable (National/International/Students/Disabled)	
Name of the proposed experts, presenters (oral and poster) and title of papers	Please mention name

3. Information about the Program

Title of the Session	Duration (hour)	Proposed Resource Person (attach brief CV separately)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
(add rows to add more sessions)		

Program conducted with UGC support in last fiscal year if any:

Title: **Duration: …… days**   **Date:**

4. Outline of the proposal

- Introduction of the program
- Justification/relevancy of the program

- Methodology used for conducting the program
- Details of the potential participants
- Details of the program syllabus/agenda
- Expected outcomes of the program
- Program budgeting
- Program-wise proposed time and venue
- Brief CV of the proposed experts
- Brochure containing aims, objectives and themes if applicable

5. Funding sources

Any other institution supporting for this program		
Amount		
Purpose		
Amount of support requested to UGC		

6. Confirmation by the Program Coordinator

I certify that the statements made above have been verified and found true. If the grant is provided, I shall solely be responsible for its proper utilization of the fund.

Name of the Institution: _____

Address: _____

Name: _____ Signature: _____

Designation: _____ Date: _____

Document Checklist

Mark with *	Document Checklist Before Program	Mark with *	Document Checklist after Program
	A cover letter signed by the head of the institution		A cover letter
	Application form with complete information		Narrative Report (Background information, objectives/outcomes, detail schedule, training methodology/delivery, outputs, conclusion and recommendations)
	Proposal		Paper presented by experts, Photograph, Attendance sheet, Template Certificate if applicable
	Other evidences mentioned in the application form		Approved statement of expenditure details, Name of Bank, Account Number and Branch
			For national and international conferences: • list of paper presented • details of panel discussion if any • Procedings/abstracts/article/papers etc

8. Undertaking by the Institution Head

I hereby undertake and affirm that:
- All the information provided above is true to the best of my knowledge.
- If the grant is provided, I shall solely be responsible for its proper utilization and provide the receipts of expenditure to UGC.
- All the supporting should be verified and attested at the Institute.

Date: _____

Institution head's Signature: _____

Official Seal

Application form for Training Program on Higher Education Planning and Administration

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal

Application form for Training Program on Higher Education Planning and Administration

Please fill out the Application Form completely. Check (√) in appropriate box.

Applicant's Background	For Official Use only
1. Full Name:	
2. Sex: Female ☐ Male ☐	☐
3. Age: Below 30 ☐ 30-40 ☐ 40-50 ☐ 50-60 ☐ Above 60 ☐	☐
4. Ethnicity Group Concerned: Brahmin/Chettri ☐ Janjati ☐ Madhesi ☐ Dalit ☐ Others ☐	
5. Recent Appointment date as Campus Chief:…………………..	☐
6. Tenure provision according to statute of campus……………..	
7. Tenure remains (to date): …… Year ……. Months ……. Days	☐
8. Contact Number: Tel …..…............... . Mobile …….................…….....	
email:	
9. Highest Degree:…………………….	☐
10. Highest Degree Percentage / CGPA: ……………………..	
11. Area of Specialization: Science ☐ Management ☐ Humanities ☐ Education ☐ Others………………………	☐
12. Research Publication by the Applicant: Yes ☐ No ☐ If Yes Number of Research Publication:……………..	☐
13. Participation in International/National Seminar/Workshop/Conference: Yes ☐ No ☐	☐
14. Vital Trainings prior received : Yes ☐ No ☐ If yes list the Trainings: a.……………………………………………………………………………… b. ……………………………………………………………………………….. c ……………………………………………………………………………… d ……………………………………………………………………………… e. ……………………………………………………………………………… f. ………………………………………………………………………………	☐
Campus Profile	

15. Name of the Campus:
    Full Address:
    Tel No:	

16. Concerned University:	☐
17. Location of the Campus: Rural ☐ Urban ☐ Metropolitan ☐	
18. Type of the Campus: Constituent ☐ Community/Public ☐	☐
	☐

19. Accreditation of the Campus: Accredited ☐ Not accredited ☐

20. Number of faculty and programs running (put the number)

Faculty	Number of Programs	
	Bachelor	Master
Total		

21. Total Number of Students:

Number of Girls: ☐

Number of Boys: ☐

22 . Size of currently working teacher and staff

Description	Total
Teacher	
Staff	
Total	

23. Reasons for Applying :

Seal of the Campus

_____
Authorized Signature
Date:

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अनुसूची − १०.२

Application form for University Community Linkage Program

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal

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Application form for University Community Linkage Program

1. General Information of Institution

University/University affiliated to			
Name of the institution (Campus/Department/School/Faculty) , Adress			
Address of the institution(Province,District,municipality)			
Contact no			
Email			
Name of the institution head			
Designation			
Contact no (Telephone/Mobile)			
Email			
Program Coordinator			
Designation			
Contact no (Telephone/Mobile)			
Email			

Academic programs currently being offered	Programs	Total number of students	
	1.		
	2.		
	3.		
	4.		
	5.		

	Full Time	Part Time
Total number of faculty involved in teaching		
Total number of faculty with Post Doctorate		
Total number of faculty with PhD		
Total number of faculty with MPhil		
Total number of Non-Teaching staffs		

2. Program Detail

Area of program	
Proposed Date	
Duration of the project	
Title of program	
Location of the project	
Total expected no. of participants (Host and others)	
Type of the participants	
Collaboration with other institutions	
No. of invitees (National & International) (Please attached a list of all possible invitees) if any	
Facilities available for the project	
Type of the project (Training / Research/ workshop/etc)	
Name of the proposed experts/partners	Please mention name

3. Information about the Program

Title of the Session	Activities	Duration (hour)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
(add rows to add more sessions)		

Program/project conducted with UGC support in last fiscal year if any:

Title: **Duration: …… days**   **Date:**

4. Outline of the proposal

- Executive Summary of the project (200 words)
- Background of the project
- Objectives of the project
- Methodology used for conducting the program
- Collaboration arrangements
- Details of the potential participants
- Details of the program syllabus/agenda
- Expected outcomes of the program
- Program budgeting
- Program-wise proposed time and venue
- Brief CV of the proposed experts

5. Funding sources

Any other institution supporting for this program		
Amount		
Purpose		
Amount of support requested to UGC		

6. Confirmation by the Program Coordinator

I certify that the statements made above have been verified and found true. If the grant is provided, I shall solely be responsible for its proper utilization of the fund.

Name of the Institution: _____

Address: _____

Name: _____   Signature: _____

Designation: _____   Date: _____

Document Checklist

Mark with *	Document Checklist Before Program	Mark with *	Document Checklist after Program
	A cover letter signed by the head of the institution		A cover letter
	Application form with complete information		Narrative Report (Background information, objectives/outcomes, detail schedule, methodology/delivery, outputs, conclusion and recommendations)
	Proposal (as per SN. 4)		Paper presented, Photograph, Attendance sheet, banner, Template Certificate if applicable
	Other evidences mentioned in the application form		Approved statement of expenditure details, Name of Bank, Account Number and Branch

8. Undertaking by the Institution Head

I hereby undertake and affirm that:

- All the information provided above is true to the best of my knowledge.
- If the grant is provided, I shall solely be responsible for its proper utilization and provide the receipts of expenditure to UGC.
- All the supporting should be verified and attested at the Institute.

Date: _____

Institution head's Signature: _____

Official Seal

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal

Application form for Higher Education Policy Dialogue Program

1. General Information of Institution

University/University affiliated to		
Name of the institution (Campus/Department/School/Faculty), Address		
Contact no		
Email		
Name of the institution head		
Designation		
Contact no (Telephone/Mobile)		
Email		
Program Coordinator		
Designation		
Contact no (Telephone/Mobile)		
Email		
Academic programs currently being offered	Programs	Total number of students
	1.	
	2.	
Total number of faculty involved in teaching	Full Time	Part Time
Total number of faculty with Post Doctorate		
Total number of faculty with PhD		
Total number of faculty with MPhil		
Total number of Non-Teaching staffs		
List of international conferences/workshops organized; latest two		
List of national conferences/workshops organized; latest two		
Research project recently completed with detail		

information of funding and time taken	
Ongoing Research Projects	

2. Outline of the proposal

- Introduction of the program
- Justification/relevancy of the program
- Methodology used for conducting the program
- Details of the participants/Stakeholders
- Details of the program activities/syllabus/agenda
- Expected outcomes of the program
- Program budgeting
- Program-wise proposed time and venue

3. Confirmation by the Program Coordinator

I certify that the statements made above have been verified and found true. If the grant is provided, I shall solely be responsible for

its proper utilization of the fund.

Name of the Institution: _____

Address: _____

Name: _____ Signature: _____

Designation: _____ Date: _____

Document Checklist

Mark with *	Document Checklist Before Program
	cover letter signed by the head of the institution
	application form with complete information
	proposal
	other evidences mentioned in the application form

7. Undertaking by the Institution Head

I hereby undertake and affirm that:
- All the information provided above is true to the best of my knowledge.
- If the grant is provided, I shall solely be responsible for its proper utilization and provide the receipts of expenditure to UGC.
- All the supporting should be verified and attested at the Institute.

Date:

Institution head's Signature: _____

Official Seal

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अनुसूची – १०.४

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UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal

Application form for Recognition to Academic Leaders for Innovation and Good Practices

</div>

1. General Information of Applicants and Intuitions currently working

Name of the Applicant	
Name of the working institution (Camus/Department/School/Faculty)	
Address	
University/University affiliated to	
Designation	
Contact no (Telephone/Mobile)	
Email	

Academic programs currently being offered	Programs	Total number of students
	1.	
	2.	
	3.	
	4.	
	5.	

	Full Time	Part Time
Total number of faculty involved in teaching		
Total number of faculty with Post Doctorate		
Total number of faculty with PhD		
Total number of faculty with MPhil		
Total number of Non-Teaching staffs		

2. Program/ Project Details

Name of the Innovation/good practice	

Originality of Innovation/ good practice (novelty of idea, uniqueness and other if any)	
Time taken to complete the program	
Total Expense Incurred	
Impact/Influence/ Relevance of project to its beneficiaries (Public awareness, contribution to Institutional Development, Socio economic Impact)	
Specific contribution in Higher Education Sector (If any)	

3. Outline of the proposal

- Executive Summary of the program
- Background of the program/project
- Objectives of the program/project
- Details of the program agenda
- Area of Implementation
- Methodology used for conducting the program/Project
- Duration of Implementation
- Collaboration arrangements if any
- Details of the stakeholder engaged and beneficiaries
- Status before and after implementation of innovation/good practices
- Resource required for implementation of innovation/good practices (Human Resources, Technology/IT, fund, infrastructure and others)
- Impacts/outcomes of the program
- Difficulties/challenges faced
- Sustainability and Replicability
- Brief CV of the participant

4. Confirmation by the Applicant

I certify that the statements made above have been verified and found true.

Name of the Applicant:

_____

Address:

_____

Signature:

5. Undertaking by the institution head if applicable

Signature

Designation

Official Seal

Document Checklist

Mark with *	Document Checklist Before Program
	A cover letter
	Application form with complete information
	Recommendation letter from the University
	Proposal (as per SN. 3)
	Soft copy of demonstration of the program (No more than 20 minutes)

Application form for hosting Visiting Professor in Higher Education Institutions

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal

Application form for hosting
Visiting Professor in Higher Education Institutions

Mark with √	Type of Program	Duration (Days)
	1. Local Visiting Professor	
	2. Foreign Visiting Professor	

1. General Information of Institution

Name of the institution (Camus/Department/School/Faculty)		
Adress		
University/University affiliated to		
Head of the Institution		
Contact no		
Email		
Focal person for the proposed program		
Designation		
Contact no (Telephone/Mobile)		
Email		
Academic Programs currently being offered	Programs	No. of Students
Total number of faculty	Full Timers	Part Timers
Total number of faculty with PhD		
Total number of faculty with MPhil		
Total number of non-teaching staffs		

2. Proposal Format

Brief Introduction of the campus	(maximum 1 page)
Background of the request program, Collaboration with other institutions (if any)	(maximum 1 page)
Justification of the program	(1/2 page)
Expected outcomes of the program	(1/2 page)
Program Budgeting	(Breakdown of activities, rate and quantity etc)
Action plan for the completion of work	(Date and schedule of program)

Program evaluation	

3. Information About the Visiting Professor

B1. Name:	B2. Institution, Address:
B3. Position: (At least Associate-Professor)	
B4. Phone No.:	
B5. Email:	
B6. Ranking of the Institution (In case of Foreign Institution) [Times Higher Education World Universities Ranking / QS Top Universities / Academic Ranking of World Universities (ARWU)]	

B7. Teaching (Total years since Associate Professor)	B8. List of Publication in Ranked Journals	
B8. Purpose of Visit:	1. Teaching a Curricular Course	
	2. Teaching a Non-curricular Course (Training)	
	3. Research	
	4. Others	

4. Document Checklist

Before Program	After Program
A cover letter	A narrative report of the program along with students' feedback
Complete application form	Attendance –Students/teachers
Proposal	Class Notes, Photographs
CV of the visiting professor	Boarding Pass if any
Invitation letter to visiting professor	Approved Statement of expenditures details
Acceptance letter from visiting professor	Name of Bank, Account Number and Branch

5. Undertaking by the Institution Head

I hereby undertake and affirm that:

- All the information provided above is true to the best of my knowledge.
- If the grant is provided, I shall solely be responsible for its proper utilization and provide the receipts of expenditure to UGC.
- All the supporting should be verified and attested at the Institute.

Date: _____

Head of the Institution's Signature: _____

Official Seal

अनुसूची −१२

Application Form for Travel Grants

UNIVERSITY GRANTS COMMISSION
Sanothimi, Bhaktapur, Nepal

Application Form for Travel Grants

1. Applicant's information

Full Name	
Sex	Male ( ) Female ( )
Age	
Date of Birth	
Highest Degree	
Citizenship	NID No:
Underprivileged group, if applicable	Janajati ( ) Dalit ( ) Others ( )
Temporary Address	
Permanent Address	
Email	
Phone no	
Mobile no	
Name of the institution (Currently working)	
Address of the institution	
Contact No	
Designation	
Mark with *	Full timer ( ) Part time ( )
Main Responsibilities	

2. Program Detail

Name of the program		
Type of the program	Tick the right choice: Seminar, Conference, Workshop, others ………….	
Type of involvement (Mark with *)	Key note speaker	
	poster presentation	
	oral presentation	
	participation only	
	Other involvement ………..	
Relevancy of the program		
Date of the program		
Venue (city/country)		
Organizer name and address		
Website		
Contact person and email		

Title of the paper intended to present	
Author/Co-other	
Abstract	
Ongoing UGC project if any (Mark *)	**Yes ( ) No ( )**
If Yes, mention title :	

3. Financial Plan

Have you approached support for funding to any others?	If 'yes' indicate the item and status	Mention the purpose (Registration/ Support for travel/ Boarding and Lodging/ Any other	Amount
Institution currently working with			
Organizer/host			
Any other sources			
Funding requested to UGC			

4. **A.** have you availed the travel grants provision in the last fiscal year? Yes   No

      B. Previous travel grants support form UGC

Date	
Event	
City/Country	
Amount	

5. Confirmation by the Institution head

I certify that the statements made above by the candidate have been verified and found true. If the applicant is selected for the grants, he/she will receive full support and guidance by the Institution.

Name of the Institution: _____

Address: _____

Name: _____   Signature: _____

Designation: _____   Date: _____

Official Seal

6. Undertaking by the applicant

I hereby undertake and affirm that:

- The substance of the research paper being presented (as indicated above) is based on the original research conducted by me / us. In case any plagiarism is proved, apart from penalties imposed, I would refund entire amount of grants.
- The above paper has not been presented before in any conference/workshop etc. and also has not been published elsewhere.
- All the information provided above is true to the best of my knowledge and belief.
- The grant amount received will be used for the purpose of which it is requested

Date: _____   Applicant's Signature: _____

7. Document Checklist

G1. Before the Program (Mark with √)		After the Program	
A cover letter signed by the applicant	√	A cover letter signed by the applicant	
Invitation/Acceptance letter		Certificate of the program attended	
Itinerary of ticket		PP presentation	
Conference brochure		Copy of visa	
Complete application form		Ticket and bills	
CV		A narrative report of the program	
Citizenship		Mention if any other funding sources support for travel including your institution	
Letter of recommendation from the institution (clarifying that the applicant is full/part timer)		Boarding pass	
Copy of abstract		Name of Bank, Account Number and Branch	

अनुसूची – १३

National Priorities for Research Funding

The Context

The overall goal of the UGC research support is to help improve quality of higher education teaching and learning practices by inculcating research culture in higher education institutions and to make higher education relevant to national development.

Drawing on the experience and outcomes of Second Higher Education Project SHEP, the current Higher Education Reforms Project (HERP), 2015-2020, is planning to continue and strengthen research funding and support programs as a major component of reform program. HERP has four major areas of reform, enhancing academic excellence through research, innovation and development is one the components.

HERP emphasizes linking research funding with the issues and needs of national priority. The funding of HERP is based on seven important disbursement linked indicators (DLIs), research, innovation and development is the seventh DLI. Preparation and implementation of national priority framework for research funding is a fundamental aspect of the DLI.

This documents outlines framework for national priority for research funding based on relevant national plans and policies and the lesson learned from SHEP research support.

Basis of priority framework for research funding

The current national development plan, strategy and the recently prepared Higher Education Policy framework (HEP) are taken as the basis for determining national priority for higher education reforms project in general and research funding in higher education in particular. The priority area for investment for national development identified by the Approach Paper of the Thirteenth Plan includes hydropower and other renewable energy, agriculture, education, health, drinking water, sanitation, physical infrastructure, tourism, industry, trade, natural resources, environment and governance. These areas can be viewed as represented by related disciplines taught in higher education institutions and particularly by academic excellence in these areas as a strong foundation for efficient utilization of resources and developmental innovations. The policy statements of HEP are consistent with priority are as identified in the national plan. HEP states that higher education development shall be focused to national socioeconomic and political development needs and priorities and that development of higher education institutions, academic programs and activities shall address following national priorities:

a) Poverty alleviation, employment generation, and holistic national economic development;

b) Development of agriculture, forest and biodiversity, tourism, water resources, hydropower, renewable energy, small industries and business;

c) Management of natural disaster, sustainable development and conservation of balanced natural environment;

d) Economic, social, and political transformation to develop culture of inclusive democracy with respect for diversity, mutual respect, and harmony

e) Conservation of national heritage, promotion of indigenous knowledge, vocation, and technology

Higher Education Policy (HEP) in its policy strategy has emphasized making research and innovations relevant to national priority needs, international trends and practices and in its policy measure has provisioned grants on the basis of national needs and priorities as well as quality. Altogether, HEP has based its policy on research and innovation on three criteria, (i) national priority, (ii) quality, and (iii) international trend and practices, and has viewed research and innovations in higher education as a competitive economic opportunity.

National Program for Higher Education Research and Development (NPHERD) has listed "academic excellence and research" as a major component of its program describing it as "a strategy for enhancing quality and relevance" of higher education. It has prepared and listed a framework for determining national priority for higher education reform and development. This framework

of priority areas for higher education research funding has been derived from the national priority framework of NPHERD. This framework is an integral part of the HERP Research Implementation Guidelines (HERP-RIG).

Listing of priority area for research funding

Following the NPHERD framework of priority for higher education reform and development, the priority for research funding will be based as follows.

The following areas are fundamental for building foundational capacity for helping attain the policy goals and economic sectors prioritized in the Approach Paper for the Thirteenth Plan, and HEP:

1. Science and Technology;
2. Engineering;
3. Medicine; and
4. Agriculture and Forestry.

These are defined as technical areas. Research activities in these areas will be defined as priority areas.

In addition, research activities determined by expert panel(s) to be associated with the following national policy goals and priorities as defined in the Approach Paper for the Thirteenth Plan, and HEP, will be treated as priority areas for funding:

(i) Reduction of economic and human development poverty;

(ii) Employment generation;

(iii) Holistic development of national economy;

(iv) Economic, social and political transformation to develop culture of inclusive democracy;

(v) Conservation and development of national heritage;

(vi) Promotion of indigenous knowledge, vocation, and technology;

(vii) Conservation and sustainable use of natural resources and environment including biodiversity;

(viii) Productivity enhancement in and diversification and commercialization of agriculture;

(ix) Development of basic education, health, drinking water and sanitation, food and nutrition;

(x) Promotion of good governance;

(xi) Transportation and other infrastructure;

(xii) Water resources;

(xiii) Renewable energy;

(xiv) Small industries and business;

(xv) Natural disaster and hazard management;

(xvi) Global warming and climate change.

(xvii) Public-private-community participation in development issues.

(xviii) Engineering and Information and Communication Technology

(xix) Biotechnology, Pharmaceuticals and Nono-technology

The priority areas can be categorized into three categories: policy goals, economic sectors and disciplines/areas of study. The following priority area framework has been drawn accordingly:

Table 1 (a): Priority Areas relating to Economic sectors/ commodities

Forestry, *fisheries*
Water resources
Renewable energy
Small industries and business
Tourism and mountaineering
Whole-sale and retail trade
Transportation, storage and communication
Housing, land utilization, and rental/ trade activities

Table 1 (b): Priority Areas relating policy goals

Nepal attaining the status of a developing country by 2022 (currently a least developed country)
Reduction of economic and human [development] poverty
Employment generation
Holistic development of national economy
Economic, social and political transformation to develop culture of inclusive democracy
Conservation and development of national heritage
Promotion of indigenous knowledge, vocation, and technology
Conservation and sustainable use of natural resources and

	environment including biodiversity
Construction	Productivity enhancement in and diversification and occupationalization of agriculture
Mining and industries	Development basic education and health, drinking water and sanitation
Education (focus on STM)	Promotion of good governance
Financial intermediation	Development of roads and other infrastructure
Textiles and Textile Articles	Development of tourism, industry and commerce
Base Metals and Articles of Base Metal	Development of hydropower and other forms of energy
Vegetable Products	Natural disaster and hazard management
Herbs and medicinal plants	Global warming and climate change

Note: The areas in italics are additional to the areas defined in the Approach Paper and HEP which were selected through the consultation with the panels of experts.

The following subject areas are fundamental to build foundational capacity to address the economic sectors and policy goals, as well as also to open new possibilities. They are also therefore listed as priorities.

Table 1 (c): Priority areas relating to disciplines and study areas

Priority Faculties	Other priority disciplines and study areas areas/programs
Science and technology	• *Interdisciplinary research activities such as natural disaster and hazard management; Global warming and climate change*
Engineering	
Medicine	• *Indigenous knowledge, arts and crafts*
Forestry	
Agriculture	

The above prioritization matrix does not include an exhaustive list of areas of study or disciplines. It would be impractical to do so since the list will be very long. However, if some important priority areas do not clearly fall under the priorities defined in the matrix they can be added under the priority disciplines/ study area table. The programs listed here in this table are examples. The proposals for initiating new programs and research should be evaluated by an expert panel to decide if they fall under the priority areas.

Application of Priority Framework in Research Funding

The following table lists the research activities and application of priority framework for research funding under HERP.

HERP supported Research Activities	Application of priority framework
Partial Support for PhD (Field Visit, Book/Reference Material, Typing/ Binding)	N/A
Faculty Research	Only the programs acceptable as per priority framework will be eligible
Institutional/Collaborative Research	Only the programs acceptable as per priority framework will be eligible
PhD Fellowship	Additional scoring weightage given for programs under priority
PhD Fellowship for faculty Members from Accredited Campuses and Campus with Autonomy (for national degree)	Additional scoring weightage given for programs under priority
MPhil Fellowship	Additional scoring weightage given for programs under priority
Master's Thesis Support for Technical Areas	Additional scoring weightage given for programs under priority
Multi-Disciplinary Research Collaboration	Only the programs acceptable as per priority framework will be eligible
Research Article publication in Refereed Journal	N/A
Publication of Refereed journal	N/A
Research Trainings	N/A
Seminar-cum-workshop on Academia Industry Dialogue	Only the programs acceptable as per priority framework will be eligible
Laboratory Support	N/A

Library Networking	N/A
Establishment of Research Management Cell	N/A

This priority framework for research funding is a part of the research program implementation guideline (RPIG) developed for HERP to plan and manage research grants, fellowships and other financial assistance to activities related to research.

Other institutional and individual eligibility for research funding are outlined in the RPIG.

Modality of assessment using priority framework for research funding

(i)   The call for proposal/EOI will explicitly and specifically refer the priority framework including eligibility criteria

(ii) Proposal/EOI evaluation will include scoring criteria relating to prioritization

(iii) The cluster committee/experts will evaluate the proposals based on pre-defined evaluation framework applying the prioritization criteria

(iv) Evaluation committee will scrutinize the evaluation scoring by the cluster's committees/experts

(v)   The overall decision regarding recommendation for research funding support will be made by the Research Council

अनुसूची १४

गुणस्तर सुनिश्चितता तथा प्रत्यायन प्रकृयाका हरेक चरणको लागि निर्धारित समयसीमा

चरणहरू	समयावधि	निःशुल्क थप हुने समयावधि	स–शुल्क थप हुने समयावधि	कैफियत
आशयपत्रको स्वीकृति पछि स्वअध्ययन प्रतिवेदन पेस गर्ने	आशय पत्र स्वीकृत भएको छ (६) महिना भित्र	मनासिब कारण सहित म्याद थपको निवेदन प्राप्त भएमा अध्यक्षको स्वीकृतिले तीन (३) महिना थप हुने - थप समयभित्र प्रतिवेदन प्राप्त नभए प्रक्रिया स्वतः रद् हुनेछ ।		
प्राविधिक समितिले स्व–अध्ययन प्रतिवेदनको पुनरावलोकन तथा स्वीकृत गर्दा				
स्व–अध्ययन प्रतिवेदनमा पृष्ठपोषण दिएमा वा सुझाव सहित अस्वीकृत गरेमा	सचिवालयले १५ दिन भित्र सम्बन्धित संस्थालाई जानकारी गराउनेछ ।			
उच्च शैक्षिक संस्थाले सचिवालय मार्फत पृष्ठपोषण प्राप्त गरेमा	उच्च शैक्षिक संस्थाले तीन महिनाभित्र पृष्ठपोषण अनुसारका प्रगती प्रतिवेदन पेस गर्नुपर्नेछ ।अन्यथा, प्रत्यायन प्रक्रिया स्वतः रद् हुनेछ ।	तर त्यस्तो उच्च शैक्षिक संस्थाले प्रत्यायन प्रक्रिया पूनः सुचारु गर्न तोकिएको शुल्क सहित तीन महिना भित्र प्रतिवेदन बुझाएमा शुल्क बुझाएको मितिले तीन महिना पछि प्रत्यायन प्रक्रिया पुनः सुचारु गर्न सकिनेछ ।		
पूर्व परीक्षणको प्रगति प्रतिवेदन पेस गर्ने	पूर्व परीक्षण भ्रमण सम्पन्न भएको पाँच (५) महिना भित्र	मनासिब कारण सहित म्याद थपको निवेदन प्राप्त भएमा अध्यक्षको स्वीकृतिले तीन (३) महिना थप हुने र सो अवधिसम्म प्रतिवेदन प्राप्त नभएमा प्रक्रिया स्वतः रद् हुनेछ ।	तर त्यस्तो उच्च शैक्षिक संस्थाले प्रत्यायन प्रक्रिया पुनः सुचारु गर्न तोकिएको शुल्क सहित तीन महिना	

पूर्ण परीक्षणको प्रगति प्रतिवेदन पेस गर्ने	पूर्ण परीक्षण भ्रमण सम्पन्न भएको तीन (३) महिना भित्र अल्पकालीन सुझाव अनुसार कार्य सम्पन्न साथै दीर्घकालीन सुझावमा कार्यान्वयन कार्य याजना सहित प्रगति प्रतिवेदन पेस गर्नु पर्नेछ ।	विशेष कारण परी कार्य सम्पन्न गर्न समय थप गर्न निवेदन प्राप्त हुन आएमा सोको विश्लेषण गरी बढीमा तीन महिनाको अवधि थप गर्न सकिनेछ । सो अवधिसम्म प्रतिवेदन प्राप्त नभएमा प्रक्रिया स्वतः रद्द हुनेछ ।	भित्र प्रतिवेदन बुझाउनुपर्नेछ । यसरी प्रतिवेदन प्राप्त भएको मितिले तीन महिना पछि मात्र प्रत्यायन प्रक्रिया पुनः सुचारु हुनेछ ।
पूरक परीक्षणको प्रगति प्रतिवेदन पेस गर्ने	पूरक परीक्षण सम्पन्न भएको तीन महिनाभित्र कार्य प्रगति प्रतिवेदन पेस गर्नु पर्नेछ ।		

अनुसूची १४.१

गुणस्तर सुनिश्चितता तथा प्रत्यायन प्रकृयामा सहभागिताका लागि उच्च शैक्षिक संस्थाहरूको आशयपत्र (LOI) स्वीकृतिको लागि निर्धारित मापदण्ड

(१) उच्च शैक्षिक संस्थाहरूले उच्च शिक्षा सेवा प्रदायकको रूपमा राष्ट्रिय दर्ता किताबमा दर्ता भई विशिष्ट कोड प्राप्त गरेको हुनुपर्नेछ,

(२) संस्थागत विवरणहरू उच्च शैक्षिक संस्थाहरूको नाम उच्च शिक्षा प्रदायकको राष्ट्रिय दर्ता किताब, सम्बन्धन पत्र तथा कम्पनी रजिस्ट्रारको कार्यालय वा संस्थाले कानुनी मान्यता प्राप्त गर्ने अन्य निकायमा पेस गरेको/दर्ता गरेको नाममा एकरूपता कायम भएको हुनु पर्नेछ,

(३) यस प्रक्रियामा आबद्धताको लागि योग्य हुन आवश्यक विद्यार्थीसंख्यादेहायको तालिकामा उल्लेख गरिएको छ

दुर्गम क्षेत्र विभाजन	विवरण	आवश्यक न्यूनतम विद्यार्थी सङ्ख्या	कैफियत
क	गाउँपालिका / नगरपालिका (अति दुर्गम – 'क')	१५०	सङ्घीय मामिला तथा सामान्य प्रशासन मन्त्रालयका अनुसार, दुर्गमता /पहुँचको तह अनुसार स्थानीय तहको प्रशासनिक वर्गीकरणलाई आधार मानिएको ।
ख	गाउँपालिका / नगरपालिका (मध्यम पहुँचयोग्य– 'ख')	२००	
ग	गाउँपालिका /नगरपालिका (पहुँचयोग्य- 'ग') ३ वटा भन्दा बढि शैक्षिक कार्यक्रम भएको अवस्थामा	३००	शैक्षिक गुणस्तर सुनिश्चितता तथा प्रत्यायन परिषद्को मिति २०७९/५/२६ गतेको बैठकको निर्णय बाट थप गरिएको व्यवस्था
	३ वटा मात्र शैक्षिक कार्यक्रम भएको अवस्थामा (तर यस्ता उच्च शैक्षिक संस्थाहरूले प्रत्यायन हुनु पूर्व ३०० विद्यार्थीसंख्यापुन्याएको हुनुपर्ने छ ।)	२००	
घ	महानगरपालिका र उप महानगरपालिका / सहर (राम्रो पहुँचयोग्य– 'घ')		
	(३ वटा भन्दा बढी शैक्षिक कार्यक्रम भएको अवस्थामा)	४००	

		२५०	
	३ वटा मात्र शैक्षिक कार्यक्रम भएको अवस्थामा (तर यस्ता उच्च शैक्षिक संस्थाहरूले प्रत्यायन हुनु पूर्व ४०० विद्यार्थीसंख्यापुऱ्याएको हुनुपर्ने छ।)		

अपवादहरू :

माथि उल्लेखित विद्यार्थीहरूको न्यूनतम संख्या एम.फिल. र पी.एच.डी जस्ता अनुसन्धान डिग्रीहरू प्रदान गर्ने उच्च शैक्षिक संस्थाहरूमा लागू हुने छैन । प्रस्तुत प्रस्ताव बमोजिम विश्वविद्यालयहरूको केन्द्रीय विभागहरू, केन्द्रीय स्कुलहरू, केन्द्रीय क्याम्पसहरू र कोटा प्रणालीमा आधारित कार्यक्रमहरू सञ्चालन गर्ने उच्च शैक्षिक संस्थाहरूमा कुल भर्ना क्षमताको वा प्रत्येक कार्यक्रममा स्वीकृत कोटाको कम्तीमा ८० प्रतिशत भर्ना पूरा गरेको हुनुपर्ने । (यस्तो योग्यताको परीक्षण गर्दा उल्लेखित संस्थाहरूमा कुल भर्ना क्षमताको वा प्रत्येक कार्यक्रममा स्वीकृत कोटाको भर्ना भएका विद्यार्थीको संख्या कम्तीमा ८० प्रतिशत, बहाल संस्थामा सञ्चालित सम्पूर्ण कार्यक्रमहरूमा पहिलो वर्ष/सेमेस्टर देखि अन्तिम वर्ष/सेमेस्टर सम्म भर्ना भएका तथा अध्ययनरत विद्यार्थीको जम्मा संख्याको आधारमा कोटाको औसत ८० प्रतिशत भएको हुनुपर्नेछ । कोटामा आधारित र साधारण विधा दुबै तर्फका कार्यक्रमहरू सञ्चालन भएका उच्च शैक्षिक संस्थाहरूमा भने माथि उल्लेखित विद्यार्थी संख्या पूरा भएको हुनु पर्दछ,

(४) उच्च शैक्षिक संस्थाले दुई वा दुईभन्दा बढी विश्वविद्यालयको सम्बन्धनका कार्यक्रमहरू एउटै परिसरभित्र सञ्चालन (सम्बन्धित विश्वविद्यालयको नियम र नियमहरूको पालना गर्दै) तथा एउटै स्थानीय निकाय (गाउँ/नगरपालिका) को राजनीतिक/प्रशासनिक क्षेत्राधिकारभित्र एउटै नाममा सञ्चालन गरेको हुनुहुँदैन,

(५) उच्च शैक्षिक संस्थाहरूले विभिन्न विश्वविद्यालयहरूबाट शैक्षिक कार्यक्रमहरू र कक्षा ११ वा १२ जस्ता विद्यालय शिक्षाका कार्यक्रमहरू, साथै प्राविधिक शिक्षा तथा व्यावसायिक तालीम परिषद्का व्यावसायिक कार्यक्रमहरूसँगै सञ्चालन गरेको हुनुहुँदैन । यदि उच्च शैक्षिक संस्थाहरूसँग फिडर स्कुल वा व्यावसायिक कार्यक्रमहरूको विस्तार छन् भने, तिनीहरूको संस्थागत व्यवस्थापन टोली (जस्तै क्याम्पस व्यवस्थापन समिति/बोर्ड अफ डाइरेक्टर्स), पूर्ण कालिन शिक्षक र कर्मचारीहरू, लेखा र वित्तीय व्यवस्थापन, परीक्षा प्रणाली, शिक्षा व्यवस्थापन सूचना प्रणाली, र पुस्तकालय अलग्गै रूपमा सञ्चालन गरि सबै उच्चशिक्षाबाट अलग गरिएको हुनुपर्दछ,

(६) उच्च शैक्षिक संस्थाहरूमा शिक्षकहरूको कुल सङ्ख्यामध्ये कम्तीमा ६०% पूर्णकालीन शिक्षकसंख्याहुनुपर्नेछ, र पूर्णकालीन शिक्षक द्वारा पाठ्यक्रम / अनुसन्धान पर्यवेक्षणको जम्माभारको ७५% भन्दा बढी भार वहन गरेको हुनुपर्दछ, साथै, गुणस्तर सुनिश्चितता तथा प्रत्यायन प्रक्रियामा रहेका संस्थाहरूले आफ्नो संस्थामा कार्यरत पूर्णकालीन शिक्षकहरू अन्य संस्थामा पूर्णकालीन रूपमा कार्यरत नरहेको सम्बन्धमा शिक्षकहरूको व्यक्तिगत स्व–घोषणा पत्र संस्थागत रूपमा समेत प्रमाणित गरी

आयोगमा पेस गर्नुपर्ने साथै परीक्षणको क्रममा अन्यथा भएको पाइएमा गुणस्तर सुनिश्चितता तथा प्रत्यायन प्रक्रिया रद्द समेत गर्न सकिनेछ ।

(गुणस्तर सुनिश्चितता तथा प्रत्यायन प्रक्रियामा रहेका संस्थाहरूले आफ्नो संस्थामा कार्यरत पूर्णकालीन शिक्षकहरूकोसंख्यासम्बन्धी पेस गर्नुपर्ने स्व–घोषणा पत्रको नमुना आयोगको वेबसाइटमा राखिएको छ ।)

(७)   कार्यकारी प्रमुख, शैक्षिक विभागीय प्रमुखहरू (HoDs), कार्यक्रम संयोजकहरू र आन्तरिक गुणस्तर सुनिश्चितता एकाइ/समिति (IQAC), को संयोजक पूर्णकालीन रूपमा नियुक्ति भई कार्यरत हुनुपर्नेछ,

(८)   उच्च शैक्षिक संस्था आशय पत्र पेस गर्ने मिति भन्दा कम्तीमा पाँच वर्ष पहिले स्थापित भएको हुनुपर्नेछ र कम्तीमा एक ब्याच विद्यार्थी दीक्षित गरेको हुनुपर्नेछ,

(९)   उच्च शैक्षिक संस्थाहरूमा आन्तरिक गुणस्तर सुनिश्चितता एकाइ/समिति (IQAC) गठन गरिएको हुनुपर्ने र यसको कार्य निर्देशिका विश्वविद्यालय अनुदान आयोगबाट अनुमोदित उच्च शैक्षिक संस्थाहरूको आन्तरिक गुणस्तर सुनिश्चितता निर्देशिका–२०७७ अनुसारको हुनुपर्नेछ तथा सो निर्देशिका उच्च शैक्षिक संस्थाको सञ्चालन समिति वा बोर्ड अफ डाइरेक्टर्सबाट पास भएको हुनुपर्नेछ,

(१०)   अनुसन्धानसम्बन्धी प्रावधान आयोगको वेभसाइटमा रहेको अनुसन्धानसम्बन्धी प्रावधान

        https://ugcnepal.edu.np/uploads/web-uploadsfiles/Research-
        related%20Criteria%20for%20participating%20in%20the%20QAA%20process(1).pdf अनुसारको पुरा
        गरेको हुनुपर्नेछ,

(११)   उच्च शैक्षिक संस्थाले पेसागत काउन्सिलहरू (व्यावसायिक पाठ्यक्रमहरू सञ्चालन गर्ने उच्च शैक्षिक संस्थाहरूलाई मात्र लागू हुने) द्वारा तोकिएको न्यूनतम मापदण्डहरू पूरा गरेको हुनुपर्छ, र उच्च शैक्षिक संस्थाहरूले स्वास्थ्य , विज्ञान कार्यक्रमहरू सञ्चालन गरेको अवस्थामा, चिकित्सा शिक्षा आयोग – मानक र मान्यता तथा प्रत्यायन समितिबाट मान्यता प्राप्त गरेको हुनुपर्छ,

(१२)   संस्थामा शैक्षिक व्यवस्थापन सूचना प्रणाली (EMIS) एकाइ गठन गरी यसका निर्देशिकाहरू र कार्यक्षेत्रगत कार्य विवरण (ToR) परिभाषित गरिएको हुनुपर्नेछ, र यस्ता निर्देशिकाहरू /कार्यक्षेत्रगत कार्य विवरण लाई व्यवस्थापन समितिबाट अनुमोदन गरिएको हुनुपर्दछ,

(१३)   भाडामा लिइएको पूर्वाधारमा सञ्चालित संस्थाहरूले संस्थागत दिगोपन र निरन्तरताका लागि आफ्नै पूर्वाधार विकास योजना तयार गरी आगामी पाँच वर्षभित्र योजना कार्यान्वयन गर्ने प्रतिबद्धता जाहेर गरेको हुनुपर्नेछ । त्यसैसरि संस्थाले आफ्नो कुल बजेटको कम्तीमा १०% रकम शैक्षिक र संस्थागत विकासका लागि विनियोजन गरेको हुनुपर्नेछ,

(१४)   भाडामा लिइएको जग्गा तथा भवनहरूको पट्टा अवधि (Lease Period) १० वर्ष भन्दा लामो (पूर्ण परीक्षण पश्चात् कम्तीमा १० वर्ष अवधि कायम हुनुपर्ने) हुनुपर्दछ र यदि कुनै पक्षले अर्को पक्षलाई सम्झौता समाप्त गर्न चाहन्छ भने संस्थाले कम्तीमा एक वर्षको पूर्व–सूचनाको प्रावधान हुने व्यवस्था मिलाएको हुनुपर्दछ,

विदेशी विश्वविद्यालयको सम्बन्धनमा सञ्चालित उच्च शैक्षिक संस्थाहरू आशय पत्रमा थप पेस गर्नुपर्ने कागजातहरू

- सम्बन्धन प्रदान गर्ने विश्वविद्यालय प्रत्यायन गर्ने अधिकार प्राप्त सम्बन्धित देशको अथवा अन्तर्राष्ट्रिय संस्थाबाट प्रत्यायनकृत भइसकेको हुनुपर्नेछ ।

- सम्बन्धन प्रदान गर्ने संस्था The Times Higher Education Ranking उत्कृष्ट ८०० वा QS World Ranking उत्कृष्ट १००० भित्र परेको हुनुपर्नेछ ।

- संस्थाले सम्बन्धन प्राप्त विदेशी विश्वविद्यालयले तोकेको मापदण्ड पुरा गरेको हुनुपर्नेछ र सम्बन्धन प्राप्त विश्वविद्यालयबाट सो सम्बन्धी सिफारिस पत्र पेस गर्नुपर्नेछ ।

- संस्थाले शिक्षा विज्ञान तथा प्रविधि मन्त्रालयबाट प्राप्त अनुमति (कार्यक्रम सुरु तथा नविकरण गरिएको) पत्र पेस गर्नुपर्नेछ ।

- संस्थाले प्रत्यायन प्रक्रियामा आबद्ध हुनका लागि शिक्षा, विज्ञान तथा प्रविधि मन्त्रालयको सिफारिस पत्र पेस गर्नुपर्नेछ ।

- निरन्तरताको सुनिश्चितता गर्न संस्थाको दिगोपना सम्बन्धी योजना (कार्यक्रम र वित्तिय दुवै) पेस गर्नुपर्नेछ ।

- आशय पत्र पेस गर्दा उच्च शैक्षिक संस्थाको सम्बन्धन संस्थाले प्रदान गर्ने शैक्षिक कार्यक्रम अवधिमा थप एक वर्षको समय अवधि कायम रहेको हुनुपर्नेछ । अथवा, सम्बन्धन प्रदान गर्ने संस्थाले सो भन्दा कम अवधिका लागि सम्बन्धन दिने व्यवस्था भएमा कम्तीमा ५ वर्ष देखि सो कार्यक्रम निरन्तर रूपमा संचालन भएको हुनुपर्नेछ ।

- नेपाल कानुनमा तोके बमोजिम कर चुक्ताको प्रमाणपत्र पेस गर्नुपर्नेछ ।

अनुसूची १४.२

गुणस्तर सुनिश्चितता तथा प्रत्यायन प्रकृयामा सहभागिताका लागि उच्च शैक्षिक संस्थाहरूको आशयपत्र (LOI) स्वीकृतिको लागि निर्धारित मापदण्ड

आवश्यक कागजातहरू (स्वयं – प्रमाणित) को विवरण

(१)   आवेदक संस्थाको निवेदन,

(२)   गुणस्तर सुनिश्चितता तथा प्रत्यायन प्रकृयामा भाग लिने सम्बन्धमा व्यवस्थापन/ सञ्चालक समिति वा समानस्तर निकायको निर्णय,

(३)   दर्ता सम्बन्धी कागजात उच्च शिक्षाको राष्ट्रिय दर्ता किताबमा दर्ता गरिएको प्रमाण (विश्वविद्यालय अनुदान आयोगद्वारा प्रदान), अन्य क्षेत्रहरूमा गरिएको दर्ता (समाज कल्याण परिषद्, कम्पनी रजिस्ट्रारको कार्यालय, शिक्षा, विज्ञान र प्रविधि मन्त्रालय) र स्थापनाको प्रमाणपत्र (क्याम्पस विधान/नियमावली/विनियमावली),

(४)   आन्तरिक गुणस्तर सुनिश्चितता समिति, शिक्षा व्यवस्थापन सूचना प्रणालीको गठन र सम्बन्धित शाखा सञ्चालन निर्देशिकाको स्वीकृति / अनुमोदन सम्बन्धी सञ्चालक समिति वा व्यवस्थापन समितिको निर्णय,

(५)   सम्बन्धित विश्वविद्यालयबाट शैक्षिक कार्यक्रमहरूको नियमित नविकरणका प्रमाणहरू सहित सम्बन्धित विश्वविद्यालयबाट प्रदान गरिएको सम्बन्धन पत्र,

(६)   सबै पूर्णकालिन शिक्षकहरूको नियुक्ति वा मनोनयनपत्र र कार्य विवरण, पूर्णकालिन शिक्षकहरू अरू कुनै संस्थामा पूर्णकालिनरूपमा कार्यरत नरहेको व्यक्तिगत स्व-घोषणा पत्र संस्थागतरूपमा समेत प्रमाणित गरेको पत्र,

(७)   पछिल्लो दुई शैक्षिक वर्षको वास्तविक विद्यार्थी भर्ना रेकर्ड,

(८)   आयोगले तोके बमोजिम अनुसन्धान बजेटअनुसार संस्थागत विकास बजेट (१०%) को यथार्त विनियोजित विवरण सहितको वार्षिक सञ्चालन बजेट, (यदि संस्था लिज सम्पतिमा सञ्चालित छ भने)   अनुसन्धान योजना,

(९)   रणनीतिक योजना (कम्तीमा ५ वर्षको लागि),

(१०)   गत तीन आर्थिक वर्षको वित्तीय लेखापरीक्षण प्रतिवेदन,

(११)   क्याम्पसको अन्तिम वर्षको वार्षिक प्रतिवेदन,

(१२)   उच्च शैक्षिक संस्थाले विभिन्न पेशागत काउन्सिलबाट कार्यक्रमहरू संचालन गरिरहेको अवस्थामा सम्बन्धित प्यागत काउन्सिल (व्यवसायिक कार्यक्रमहरू भएका उच्च शक्षिक संस्थाहरूमा लागू हुने) बाट स्वीकृत हुने कार्यक्रमहरूको सूची वा स्वास्थ्य विज्ञानका कार्यक्रम सञ्चालन गरेका उच्च शैक्षिक संस्थाले चिकित्सा शिक्षा आयोबाट प्राप्त गरेको मान्यताको पत्र,

(१३)   आन्तरिक गुणस्तर सुनिश्चितता समिति सहित संस्थाको संगठनात्मक संरचना,

(१४)   विद्यालयस्तरका कार्यक्रमहरू र विभिन्न विश्वविद्यालयहरूको सम्बन्धन अन्तर्गत कार्यक्रमहरू अस्तित्वमा नरहेको वा पूर्णरूपमा अलग्गै रहेकोबारे क्याम्पस व्यवस्थापन समिति/बोर्ड अफ डाईरेक्टर्सको आधिकारि घोषणा पत्र,

(१५)   प्रत्यायनकृत भएको भए प्रत्यायन प्रमाणपत्रको प्रतिलिपि,

(१५)   संस्थागत दुरदृष्टि, अभियान, लक्ष्य, उद्देश्य देखाउने संस्थागत कागजातहरू,

(१६)   अन्तर्राष्ट्रिय शैक्षिक संस्थाहरूसँग MOU भएको भए वा यदि आशयपत्रमा दावी गरिएको छ भने तिनीहरूको प्रतिलिपि,

(१७)   गुणस्तर मूल्याङ्कन एजेन्सीद्वारा प्रदान गरिएको पुरस्कार वा मान्यताको प्रमाणपत्रको प्रतिलिपि (भएको भए वा यदि आशयपत्रमा दावी गरिएको छ भने),

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विश्वविद्यालयहरू र समान स्तरका शैक्षिक संस्थाहरूको आशय पत्र (LOI) स्वीकृतिको लागि निर्धारित मापदण्ड

(१) सङ्घीय तथा प्रदेश व्यवस्थापिकाबाट जारी ऐन अनुसार स्थापित सबै प्रकारका विश्वविद्यालय तथा शैक्षिक उपाधि प्रदान गर्ने अधिकार प्राप्त विश्वविद्यालय स्तरका प्रतिष्ठानहरू यस प्रक्रियामा सहभागी हुन सक्नेछन्,

(२) प्रकृयामा सहभागि हुनुपूर्व विश्वविद्यालय तथा प्रतिष्ठानहरू, विश्वविद्यालय अनुदान आयोगको उच्च शिक्षा प्रदायकको राष्ट्रिय रजिस्ट्रीमा (National Registry of Higher Education) दर्ता भएको हुनु पर्नेछ । यसरी दर्ता पश्चात् प्राप्त विशिष्ठ कोड आवेदन फारममा उल्लेख गर्नु पर्नेछ,

(३) यदि कुनै विश्वविद्यालय वा प्रतिष्ठान सम्बन्धन प्रदान गर्ने अधिकार सहितको भएमा, यस प्रक्रियामा सहभागि हुनुपूर्व आफू अन्तर्गत सम्बन्धन प्राप्त गरेका सबै योग्य उच्च शैक्षिक संस्थाहरू शैक्षिक गुणस्तर सुनिश्चतता तथा प्रत्यायन परिषद् अन्तर्गत गुणस्तर सुनिश्चतता तथा प्रत्यायन प्रक्रियामा कम्तीमा आशय पत्र (LOI) स्वीकृत भइसकेको हुनुपर्नेछ । यसरी आशय पत्र स्वीकृति, स्व–अध्ययन प्रतिवेदन स्वीकृति, समकक्षी परीक्षण मूल्याङ्कन र प्रत्यायन जस्ता हरेक चरण आशयपत्र पेस गर्न योग्य सबै सम्बन्धन प्राप्त शैक्षिक संस्थाले पार गरे अनुरूप विश्वविद्यालयहरू उक्त चरणको लागि योग्य हुनेछ,

(४) विश्वविद्यालयमा विश्वविद्यालयको सिनेट/कार्यकारी परिषद् वा समान तहको समितिबाट निर्णय भई विश्वविद्यालय स्तरिय आन्तरिक गुणस्तर सुनिश्चतता तथा प्रत्यायन समिति/एकाइ गठन भएको हुनुपर्नेछ । यस्तो समितिको निर्देशिका र समिति संयोजक/ सदस्यहरूको कार्य विवरण तयार भई अनुमोदन भएको हुनुपर्नेछ । त्यसै गरि समिति अन्तर्गत सचिवालय स्थापना भई सो को नेतृत्व रेक्टर /डीन/निर्देशकले गर्नुपर्दछ,

(५) विश्वविद्यालय अनुदान आयोगको आन्तरिक गुणस्तर सुनिश्चतता निर्देशिका – २०७७ अनुरूपको विश्वविद्यालयको आन्तरिक गुणस्तर सुनिश्चतता समितिसँग यसको नीति र सञ्चालन निर्देशिका हुनुपर्नेछ,

(६) विश्वविद्यालयको स्थापना भएको कम्तीमा १० वर्ष पुरा भएको हुनुपर्नेछ । यसका शैक्षिक कार्यक्रमहरू सञ्चालनमा रहेका र विद्यार्थीहरूलाई उपाधि प्रदान गरिसकेको हुनुपर्नेछ,

(७) विश्वविद्यालयले विभिन्न व्यावसायिक परिषद् (Professional Council) बाट कार्यक्रमहरू सञ्चालन गरिरहेको अवस्थामा सम्बन्धित व्यावसायिक परिषद् (व्यावसायिक कार्यक्रमहरू भएका उच्च शैक्षिक संस्थाहरूमा लागू हुने) वाट स्वीकृत कार्यक्रमहरूको सूची वा स्वास्थ्य विज्ञानका कार्यक्रम सञ्चालन गरेका उच्च शैक्षिक संस्थाले चिकित्सा शिक्षा आयोगबाट प्राप्त गरेको मान्यताको पत्र प्राप्त गरेको हुनुपर्दछ,

(८) शिक्षा व्यवस्थापन सूचना प्रणाली (EMIS) एकाइ गठन गरी यसका निर्देशिकाहरू र कार्यक्षेत्रगत कार्यविवरण (TOR) परिभाषित गरिएको हुनुपर्नेछ, र यस्ता निर्देशिकाहरू /कार्यक्षेत्रगत कार्य विवरण कार्यकारी परिषद्बाट अनुमोदन गरिएको हुनुपर्दछ,

(९) विश्वविद्यालय, (निजी, सार्वजनिक, सामुदायिक, वा ट्रस्ट–व्यवस्थित संस्था) हरूको नाममा जग्गा र पूर्वाधार सम्बन्धित सम्पत्तिहरूमा ६० प्रतिशत भन्दा बढी स्वामित्व भएको हुनुपर्नेछ । अन्यथा प्रत्यायन प्रक्रियामा सामेल हुन पाइने छैन,

(अन्य व्यवस्था शैक्षिक गुणस्तर सुनिश्चतता तथा प्रत्यायन निर्देशिका २०८१ बमोजिम हुनेछ ।)

अनुसूची १४.४

आशयपत्र फारमको साथ विश्वविद्यालयहरू र समानस्तरका शैक्षिक संस्थाहरूले पेस गर्नुपर्ने कागजातहरूको सूची

आशयपत्र स्वीकृतिको लागि पेश गर्ने आवश्यक कागजातहरू (स्वयं – प्रमाणित गरिएको)

(१) आवेदक संस्थाको निवेदन,

(२) भरिएको आशयपत्र फारम,

(३) विश्वविद्यालय ऐन / स्थापना मिति र सम्बन्धित कानुनी कागजातको प्रमाणपत्रको प्रतिलिपि,

(४) गुणस्तर सुनिश्चितता तथा प्रत्यायन प्रक्रियामा सहभागी हुने सम्बन्धमा कार्यकारी परिषद्को निर्णय,

(५) दर्ता सम्बन्धी कागजात उच्चशिक्षाको राष्ट्रिय दर्ता किताबमा दर्ता गरिएको विशिष्ठ कोड वा अन्यत्र दर्ता गरिएको (समाज कल्याण परिषद्, कम्पनी रजिस्ट्रारको कार्यालय, शिक्षा, विज्ञान र प्रविधि मन्त्रालय) अवस्थामा सम्बन्धित निकायबाट प्रदान गरिएको दर्ता प्रमाणपत्रको प्रतिलिपि,

(६) आन्तरिक गुणस्तर सुनिश्चितता समिति, शिक्षा व्यवस्थापन सूचना प्रणालीको गठन र सम्बन्धित शाखा परिचालन निर्देशिकाको स्वीकृति / अनुमोदन सम्बन्धी कार्यकारी परिषद्को निर्णय,

(७) विश्वविद्यालयको दुरदृष्टि, अभियान, लक्ष्य, उद्देश्य देखाउने संस्थागत कागजातहरू,

(८) विश्वविद्यालयको आन्तरिक गुणस्तर सुनिश्चितता समिति निर्देशिका,

(९) विश्वविद्यालय अनुदान आयोग आंगिक क्याम्पस (हरू) / विद्यालय (हरू) / सम्बन्धन प्राप्त क्याम्पसहरूको सूची र तिनीहरू गुणस्तर सुनिश्चितता तथा प्रत्यायन प्रक्रियामा सामेल भएको प्रमाण (आशय पत्रहरूको स्वीकृत प्रतिलिपि),

(१०) पछिल्लो पाँच शैक्षिक वर्षको वास्तविक विद्यार्थी भर्ना रेकर्ड,

(११) वार्षिक सञ्चालन बजेटमा अनुसन्धान बजेट (५%) को स्पष्ट विभाजन देखिने विवरण

(१२) रणनीतिक योजना (कम्तीमा ५ वर्षको लागि),

(१३) गत तीन आर्थिक वर्षको वित्तीय लेखापरीक्षण प्रतिवेदन,

(१४) विश्वविद्यालयको पछिल्लो वर्षको वार्षिक प्रतिवेदन,

(१५) विश्वविद्यालयले विभिन्न व्यावसायिक परिषद् बाट कार्यक्रमहरू सञ्चालन गरिरहेको अवस्थामा सम्बन्धित व्यावसायिक परिषद् वाट स्वीकृत कार्यक्रमहरूको सूची वा स्वास्थ्य विज्ञानका कार्यक्रम सञ्चालन गरेको भएमा चिकित्सा शिक्षा आयोगबाट प्राप्त गरेको मान्यताको पत्र,

(१६) आन्तरिक गुणस्तर सुनिश्चितता समिति सहित संस्थाको सङ्गठनात्मक संरचना,

(१७) अन्तर्राष्ट्रिय शैक्षिक संस्थाहरूसँग MOU भएको भए वा यदि आशयपत्रमा दावी गरिएको छ भने तिनीहरूको प्रतिलिपि,

(१८) गुणस्तर मूल्याङ्कन एजेन्सी द्वारा प्रदान गरिएको पुरस्कार वा मान्यताको प्रमाणपत्रको प्रतिलिपि (भएको भए वा यदि आशयपत्रमा दावी गरिएको छ भने),

(१९) शिक्षा व्यवस्थापन सूचना प्रणाली इकाई स्थापना गर्ने कार्यकारी परिषद्को निर्णय र सोको निर्देशिका,